### SAMPLE SELECTED MEASURES (COM) REPORT – CRS 2006 V.6.0 ALL PERFORMANCE MEASURE TOPICS

Cover Page

\*\*\* IHS 2006 Clinical Performance Report \*\*\*

CRS 2006, Version 6.0

Date Report Run: Dec 12, 2005

Site where Run: DEMO HOSPITAL

Report Generated by: USER, SAMPLE

Report Period: Jan 01, 2005 to Dec 31, 2005

Previous Year Period: Jan 01, 2004 to Dec 31, 2004

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Measures: Selected Measures (User Defined)
Population: AI/AN Only (Classification 01)

RUN TIME (H.M.S): 3.59.32

Denominator Definitions used in this Report:

### ACTIVE CLINICAL POPULATION:

- 1. Must reside in a community specified in the community taxonomy used for this report.
- 2. Must be alive on the last day of the Report period.
- 3. User defines population: a) Indian/Alaska Natives Only based on Classification of 01; b) Non AI/AN (not 01); or c) Both.
- 4. Must have 2 visits to medical clinics in the 3 years prior to the end of the Report period. At least one visit must include: 01 General, 06 Diabetic, 10 GYN, 12 Immunization, 13 Internal Med, 20 Pediatrics, 24 Well Child, 28 Family Practice, 57 EPSDT, 70 Women's Health, 80 Urgent, 89 Evening. See User Manual for complete description of medical clinics.

### USER POPULATION:

- 1. Definitions 1-3 above.
- 2. Must have been seen at least once in the 3 years prior to the end of the Report period, regardless of the clinic type.

Community Taxonomy Name: SAMPLE GPRA COMMUNITY
The following communities are included in this report:

COMMUNITY #1	COMMUNITY #2
COMMUNITY #3	COMMUNITY #4
FACILITY #1	FACILITY #2
FACILITY #3	FACILITY #4
FACILITY #5	RURAL SITE #1
URBAN SITE #1	URBAN SITE #2

PLEASE NOTE: This is a sample Selected Measures w/Community Specified (COM) report for all measures, which has been compiled from various sources for CRS 2006 (BPG version 6.0). Some manual formatting has been done to condense the report for printing purposes. Your report may not appear exactly the way this report does.

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

#### Diabetes Prevalence

### Denominator(s):

All User Population users. Breakdown by gender and by age groups: <15, 15-19, 20-24, 25-34, 35-44, 45-54, 55-64, >64.

#### Numerator(s):

Anyone diagnosed with Diabetes at any time before the end of the Report period.

Anyone diagnosed with Diabetes during the Report Period.

Age is calculated at the beginning of the Report Period. Diabetes diagnosis is defined as at least one diagnosis 250.00-250.93 recorded in the V POV file.

During FY 2006, continue tracking (i.e., data collection and analyses) Area age-specific diabetes prevalence rates to identify trends in the age-specific prevalence of diabetes (as a surrogate marker for diabetes incidence) for the AI/AN population.

IHS Performance: FY 2004 - 10.%

	REPORT PERIOD	00	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# User Pop	24,005		23,943			23,717		
# w/ any DM DX # w/ DM DX	2,214	9.2	2,065	8.6	+0.6	1,786	7.5	+1.7
w/in past year	1,590	6.6	1,488	6.2	+0.4	1,449	6.1	+0.5
# Male User Pop	11,367		11,343			11,287		
# w/ any DM DX # w/DM DX	963	8.5	914	8.1	+0.4	780	6.9	+1.6
w/in past year	708	6.2	683	6.0	+0.2	655	5.8	+0.4
# Female User Pop	12,638		12,600			12,430		
# w/ any DM DX # w/ DM DX	1,251	9.9	1,151	9.1	+0.8	1,006	8.1	+1.8
w/in past year	882	7.0	805	6.4	+0.6	794	6.4	+0.6

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Age Specific Diabetes Prevalence

		TOTAL U						
	<15	15-19		Distri 25-34		45-54	55-64	>64 yrs
CURRENT REPORT PERIOD Total # User Pop # w/ DM DX ever % w/ DM DX ever	7,975 11 0.1	2,617 15 0.6	2,034 45 2.2	188		2,213 545 24.6	470	597
<pre># w/DM DX in past yr % w/DM DX in past yr</pre>	3	7		105 3.1		399 18.0	380 29.9	
PREVIOUS YEAR PERIOD Total # User Pop # w/ DM DX ever % w/ DM DX ever	8,227 11 0.1	15	1,957 43 2.2	3,417 175 5.1	321	2,114 506 23.9	437	557
<pre># w/DM DX in past yr % w/DM DX in past yr</pre>	3	9	17 0.9	100 2.9	_	370 17.5		
CHANGE FROM PREV YR % w/ DM DX ever w/DM DX in past yr	+0.0	-0.0 -0.1		+0.5+0.2		+0.7 +0.5		
BASELINE REPORT PERIOD Total # User Pop # w/ DM DX ever % w/ DM DX ever	8,551	2,456 15 0.6	2,014 36 1.8	3,339 144 4.3	299	1,894 419 22.1	1,157 391 33.8	471
<pre># w/DM DX in past yr % w/DM DX in past yr</pre>	2	13 0.5	20 1.0	105 3.1	_	352 18.6	334 28.9	
CHANGE FROM BASE YR % w/ DM DX ever w/DM DX in past yr	+0.0	-0.0 -0.3	+0.4	+1.3	+1.2	+2.5 -0.6	+3.2+1.0	+4.2 +0.2

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Age Specific Diabetes Prevalence

		MALE U	SER POP	ULATION	•					
		Age Distribution								
	<15	15-19	20-24	25-34	35-44	45-54	55-64	>64 yrs		
CURRENT REPORT PERIOD Total MALE User Pop # w/ DM DX ever % w/ DM DX ever		1,312 7 0.5			162		551 213 38.7	220		
# w/DM DX in past yr % w/DM DX in past yr	1	4	9		111 7.7		168 30.5			
PREVIOUS YEAR PERIOD Total MALE User Pop # w/ DM DX ever % w/ DM DX ever	5	1,241 8 0.6	17	78	1,384 151 10.9	256	195	204		
<pre># w/DM DX in past yr % w/DM DX in past yr</pre>			10 1.1	47 2.9		196 21.2	158 29.6	_		
CHANGE FROM PREV YR % w/ DM DX ever w/DM DX in past yr		-0.1 -0.2			+0.4+0.0			+1.0 +0.5		
BASELINE REPORT PERIOD Total MALE User Pop # w/ DM DX ever % w/ DM DX ever	4,330	8	12		135		488 170 34.8			
<pre># w/DM DX in past yr % w/DM DX in past yr</pre>				56 3.5			140 28.7			
CHANGE FROM BASE YR % w/ DM DX ever w/DM DX in past yr		-0.1 -0.3			+1.1					

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Age Specific Diabetes Prevalence

		FEMALE	USER PO	PULATIO	N			
			Age					
	<15	15-19	20-24	25-34	35-44	45-54	55-64	>64 yrs
CURRENT REPORT PERIOD Total FEMALE User Pop # w/ DM DX ever % w/ DM DX ever	6	8		106	181	287	721 257 35.6	377
<pre># w/DM DX in past yr % w/DM DX in past yr</pre>						200 15.7		
PREVIOUS YEAR PERIOD Total FEMALE User Pop # w/ DM DX ever % w/ DM DX ever	6	7	1,016 26 2.6	97	170	250	696 242 34.8	353
<pre># w/DM DX in past yr % w/DM DX in past yr</pre>				53 2.9		174 14.6		
CHANGE FROM PREV YR % w/ DM DX ever w/DM DX in past yr		+0.1				+1.5 +1.0		+0.9
BASELINE REPORT PERIOD Total FEMALE User Pop # w/ DM DX ever % w/ DM DX ever	4,221 7	7	24	79		1,063 214 20.1		
<pre># w/DM DX in past yr % w/DM DX in past yr</pre>			12 1.1	49 2.8	_	174 16.4		_
CHANGE FROM BASE YR % w/ DM DX ever w/DM DX in past yr		+0.0	+0.5			+2.4		+4.4 -0.1

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

Diabetes Comprehensive Care

### Denominator(s):

Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes prior to the Report Period, AND at least 2 visits during the Report Period, AND 2 DM-related visits ever.

#### Numerator(s):

Patients with Hemoglobin Alc documented during the Report Period, regardless of result.

Patients with Blood Pressure documented during the Report Period. Patients with LDL completed during the Report Period, regardless of result

Patients with positive urine protein test or, if urine protein test is negative, any microalbuminuria test, regardless of result, during the Report period.

Patients receiving a qualified retinal evaluation during the Report Period, or a documented refusal of a diabetic retinal exam.

Patients with Alc AND Blood Pressure AND LDL AND Nephropathy Assessment AND Retinal exam.

First Purpose of Visit 250.00-250.93 recorded in the V POV file prior to the Report period.

Alc definition: Counts most recent Alc test during the Report period, defined as: CPT 83036; LOINC taxonomy; or site-populated taxonomy DM AUDIT HGB AlC TAX.

BP definition: Having a minimum of 2 Blood Pressures documented on non-ER visits during the Report period.

LDL definition: Finds last test done during the Report period; defined as: CPT 83721; LOINC taxonomy; site-populated taxonomy DM AUDIT LDL CHOLESTEROL TAX.

Nephropathy assessment definition: CRS searches for last microalbuminuria test done during the Report period, regardless of result. If none found, searches for last urine protein test with positive (Y) value in same time period. Positive value for urine protein is defined as: 1) First character of result is "P", "p", "M", "m", "L", "l", "S", or "s"; 2) Contains a + sign; 3) Contains a > symbol; 4) numeric value (if the result is a number) is > (greater than) 29. 1) Urine protein defined as: LOINC taxonomy; site-populated taxonomy DM AUDIT URINE PROTEIN TAX. 2) Microalbuminuria defined as: CPT codes 82043, 82044; LOINC taxonomy; site-populated taxonomy DM AUDIT MICROALBUMINURIA TAX or DM AUDIT A/C RATIO taxonomy.

Qualified retinal evaluation\* is defined as: (1) diabetic retinal exam or

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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documented refusal or (2) other eye exam.

Diabetic retinal exam defined as: Clinic Code A2 Diabetic Retinopathy or Exam Code 03 Diabetic Eye Exam or Refusal Exam 03.

Other Eye Exam defined as: (1) Non-DNKA (did not keep appointment) visits to ophthalmology, optometry or qualifying\* tele-ophthalmology retinal evaluation clinics (i.e. JVN, Inoveon, EyeTel) or (2) non-DNKA visits to an optometrist or ophthalmologist. Searches for the following codes in the following order: Clinic Codes 17, 18, 64; Provider Code 24, 79, 08; CPT 92002, 92004, 92012, 92014, 92015.

\*Qualified retinal evaluation: The following methods are qualified for this measure:

- Dilated retinal examination by an optometrist or ophthalmologist
- 7 standard fields steroscopic photos (ETDRS) evaluated by an optometrist or ophthalmologist
  - Any photographic method validated to ETDRS, i.e. JVN, Inoveon, EyeTel

Increase the proportion of diabetic patients who receive all appropriate assessments.

BP Assessed: IHS 2010 Goal: 95%

	REPORT PERIOD	90	PREV YR PERIOD	90	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Diabetic Pts	1,412		1,304			1,156		
# w/Alc done								
w/ or w/o result	1,081	76.6	929	71.2	+5.3	925	80.0	-3.5
# w/ BPs documented	1,315	93.1	1,195	91.6	+1.5	1,042	90.1	+3.0
# w/ LDL done	442	31.3	1	0.1	+31.2	161	13.9	+17.4
# w/pos urine								
protein / any								
microalbuminuria	705	49.9	181	13.9	+36.0	0	0.0	+49.9
# w/Retinal Evaluati	on							
or refusal	806	57.1	748	57.4	-0.3	669	57.9	-0.8
# w/ All	181	12.8	0	0.0	+12.8	0	0.0	+12.8

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Diabetes: Glycemic Control

### Denominator(s):

All User Population patients diagnosed with diabetes prior to the Report period.

GPRA Denominator: Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes prior to the Report Period, AND at least 2 visits during the Report Period, AND 2 DM-related visits ever. Active Adult Diabetic patients, defined by meeting the following criteria: 1) who are 19 or older at the beginning of the Report Period, 2) whose first ever DM diagnosis occurred prior to the Report Period; 3) who had at least 2 DM related visits ever, 4) at least one encounter with DM POV in a primary clinic with a primary provider during the Report period; and 5) never have had a creatinine value greater than 5.

### Numerator(s):

Number of patients with a Hemoglobin Alc documented during the Report Period, regardless of result.

GPRA Numerator: Poor Control. Patients with Alc greater than (>) 9.5. Very Poor Control. Patients with Alc equal to or greater than (=>) 12. Poor Control. Patients with Alc greater than (>) 9.5 or less than (<) 12.

Fair Control. Patients with A1c equal to or greater than (=>) 8 and less than or equal to (<=) 9.5.

Good Control. Patients with Alc equal to or greater than (=>) 7 and less than (<) 8.

GPRA Numerator: Ideal Control. Patients with Alc less than (<) 7. Without result. Patients with Alc documented but no value.

First Purpose of Visit 250.00-250.93 recorded in the V POV file prior to the Report Period. Counts most recent Alc test during the Report Period. Alc defined as: CPT 83036; LOINC taxonomy; or site-populated taxonomy DM AUDIT HGB AlC TAX. Without result is defined as Alc documented but with no value.

Poor Glycemic Control: During FY 2006, assure that the proportion of patients with diagnosed diabetes that have poor glycemic control (defined as Alc > 9.5) does not increase above the FY 2005 level.

Improved Glycemic Control: During FY 2006, maintain the proportion of patients with diagnosed diabetes that have demonstrated ideal glycemic control (defined as A1c < 7) at the FY 2005 level.

Alc documented: IHS Performance: FY 2004 - 77.0%, FY 2003 - 75%; HP 2010 Goal: 50%

Ideal Glycemic Control (<7): IHS Performance: FY 2004 - 27%, FY 2003 -

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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28%; IHS 2010 Goal: 40%

	REPORT PERIOD	%	PREV YR PERIOD	0/0	CHG from PREV YR %		%	CHG from BASE %
User Pop w/ DM DX prior to report end date	1,986		1,849			1,570		
<pre># w/Alc done w/ or w/o result # w/Alc =&gt;12 # w/Alc &gt;9.5</pre>	1,095 41	55.1 2.1	938 40	50.7	+4.4 -0.1	944 69	60.1	-5.0 -2.3
and <12 # w/Alc =>8	188	9.5	141	7.6	+1.8	182	11.6	-2.1
and =<9.5 # w/Alc=>7	255	12.8	193	10.4	+2.4	175	11.1	+1.7
and <8 # w/Alc <7 # w/Alc w/o Result	193 373 45	9.7 18.8 2.3	169 190 205	9.1 10.3	+0.6 +8.5 -8.8	176 225 117	11.2 14.3	-1.5 +4.5 -5.2
Active Diabetic Pts (GPRA)	1,412		1,304			1,156		
<pre># w/Alc done w/ or w/o result # w/Alc</pre>	1,081	76.6	929	71.2	+5.3	925	80.0	-3.5
> 9.5 (GPRA) # w/Alc =>12 # w/Alc >9.5	229 41	16.2 2.9	181 40	13.9 3.1	+2.3 -0.2	250 68	21.6 5.9	-5.4 -3.0
and < 12 # w/Alc =>8	188	13.3	141	10.8	+2.5	182	15.7	-2.4
and $=<9.5$	255	18.1	192	14.7	+3.3	174	15.1	+3.0
# w/Alc=>7 and <8	193	13.7	169	13.0	+0.7	173	15.0	-1.3
# w/A1c <7 (GPRA)	367	26.0	185	14.2	+11.8	223	19.3	+6.7
# w/Alc w/o Result	37	2.6	202	15.5	-12.9	105	9.1	-6.5

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Diabetes: Glycemic Control (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Adult Diabet	_							
Patients	1,096		1,000			939		
# w/Alc done w/								
or w/o result	989	90.2	864	86.4	+3.8	892	95.0	-4.8
# w/A1c =>12	39	3.6	39	3.9	-0.3	66	7.0	-3.5
# w/A1c > 9.5								
and <12	184	16.8	137	13.7	+3.1	181	19.3	-2.5
# w/A1c =>8								
and $=<9.5$	245	22.4	180	18.0	+4.4	171	18.2	+4.1
# w/A1c =>7								
and <8	185	16.9	160	16.0	+0.9	172	18.3	-1.4
# w/A1c <7	322	29.4	164	16.4	+13.0	206	21.9	+7.4
# w/A1c								
w/o Result	14	1.3	184	18.4	-17.1	96	10.2	-8.9

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Diabetes: Blood Pressure Control

#### Denominator(s):

All User Population patients diagnosed with diabetes prior to the Report period.

GPRA Denominator: Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes prior to Current Report Period, AND at least 2 visits during the Report Period, AND 2 DM-related visits ever

Active Adult Diabetic patients, defined by meeting the following criteria: 1) who are 19 or older at the beginning of the Report Period, 2) whose first ever DM diagnosis occurred prior to the Report Period; 3) who had at least 2 DM related visits ever, 4) at least one encounter with DM POV in a primary clinic with a primary provider during the Report period; and 5) never have had a creatinine value greater than 5.

### Numerator(s):

Patients with Blood Pressure documented during the Report Period. GPRA Numerator: Patients with controlled BP, defined as < 130/80, i.e., the mean systolic value is less than 130 AND the mean diastolic value is less than 80.

Patients with BP that is not controlled.

First DM Purpose of Visit 250.00-250.93 recorded in the V POV file prior to the Report Period.

CRS uses mean of last 3 Blood Pressures documented on non-ER visits during the Report Period. If 3 BPs are not available, uses mean of last 2 non-ER BPs. If a visit contains more than 1 BP, the lowest BP will be used, defined as having the lowest systolic value. The mean Systolic value is calculated by adding the last 3 (or 2) systolic values and dividing by 3 (or 2). The mean Diastolic value is calculated by adding the diastolic values from the last 3 (or 2) blood pressures and dividing by 3 (or 2). If the systolic and diastolic values do not BOTH meet the criteria for controlled, then the value is considered not controlled.

During FY 2006, maintain the proportion of patients with diagnosed diabetes that have achieved blood pressure control at the FY 2005 level.

Controlled BP: IHS Performance: FY 2004 - 35.0%, FY 2003 - 37%; IHS 2010 Goal: 50%

BP Assessed: IHS 2010 Goal: 95%

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Diabetes: Blood Pressure Control (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
User Pop w/ DM DX pr to report period	rior 1,986		1,849			1,570		
# w/ BPs Documented # w/controlled BP	1,459	73.5	1,323	71.6	+1.9	1,141	72.7	+0.8
<pre></pre>	516	26.0	428	23.1	+2.8	412	26.2	-0.3
# w/Not controlled BP	943	47.5	895	48.4	-0.9	729	46.4	+1.0
Active Diabetic Pts (GPRA)	1,412		1,304			1,156		
<pre># w/ BPs Documented # w/Controlled BP</pre>	1,315	93.1	1,195	91.6	+1.5	1,042	90.1	+3.0
< 130/80 (GPRA)	447	31.7	379	29.1	+2.6	364	31.5	+0.2
<pre># w/Not controlled BP</pre>	868	61.5	816	62.6	-1.1	678	58.7	+2.8
Active Adult Diabeti Patients	.c 1,096		1,000			939		
# w/ BPs Documented # w/Controlled BP	1,077	98.3	976	97.6	+0.7	912	97.1	+1.1
< 130/80	371	33.9	300	30.0	+3.9	324	34.5	-0.7
<pre># w/Not controlled BP</pre>	706	64.4	676	67.6	-3.2	588	62.6	+1.8

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Diabetes: Lipids Assessment

### Denominator(s):

All User Population patients diagnosed with diabetes prior to the Report period.

GPRA Denominator: Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes prior to the Report Period, AND at least 2 visits during the Report Period, AND 2 DM-related visits ever. Active Adult Diabetic patients, defined by meeting the following criteria: 1) who are 19 or older at the beginning of the Report Period, 2) whose first ever DM diagnosis occurred prior to the Report Period; 3) who had at least 2 DM related visits ever, 4) at least one encounter with DM POV in a primary clinic with a primary provider during the Report period; and 5) never have had a creatinine value greater than 5.

#### Numerator(s):

Patients who have had either a LIPID PROFILE or an LDL, an HDL and Triglyceride (TG) (all three) during the Report Period.

GPRA Numerator: Patients with LDL completed during the Report Period, regardless of result.

Patients with LDL results less than (<) 130.

A: Patients with LDL results less than or equal to (<=) 100.

B: Patients with LDL results 101-129.

First DM Purpose of Visit 250.00-250.93 recorded in the V POV file prior to the Report Period. For Numerators 1 and 2, counts all Y instances reported, regardless of the results of the measurement. For each test, finds the last test done during the Report Period. Test Definitions: 1) Lipid Profile: CPT 80061; LOINC taxonomy; site-populated taxonomy DM AUDIT LIPID PROFILE TAX. 2) LDL: CPT 83721; LOINC taxonomy; site-populated taxonomy DM AUDIT LDL CHOLESTEROL TAX. 3) HDL: CPT 83718; LOINC taxonomy; site-populated taxonomy DM AUDIT HDL TAX. 4) Triglyceride: 84478; LOINC taxonomy; site-populated taxonomy DM AUDIT TRIGLYCERIDE TAX.

During FY 2006, increase the proportion of patients with diagnosed diabetes assessed for dyslipidemia (LDL cholesterol) over the FY 2005 level

Patients Assessed: IHS Performance: IHS FY 2004 - 53.0%, FY 2003 - 47.5%; HP 2010 Goal: 70%

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Diabetes: Lipids Assessment (con't)

	REPORT PERIOD	90	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
User Pop w/ DM DX pr to report period	ior 1,986		1,849			1,570		
# w/Lipid Profile OR TG & HDL & LDL								
recorded	597	30.1	5	0.3	+29.8	397	25.3	
# w/ LDL done	463	23.3	1	0.1	+23.3	163	10.4	
# w/LDL <130	3	0.2	1	0.1	+0.1	124	7.9	
A. $\# W/LDL = <100$	1	0.1	0	0.0	+0.1	68	4.3	
B. # w/LDL 101-129	2	0.1	1	0.1	+0.0	56	3.6	-3.5
Active Diabetic Pts								
(GPRA)	1,412		1,304			1,156		
# w/Lipid Profile OR TG & HDL & LDL								
recorded # w/ LDL done	570	40.4	5	0.4	+40.0	389	33.7	+6.7
(GPRA)	442	31.3	1	0.1	+31.2	161	13.9	+17.4
# w/LDL <130	3	0.2	1	0.1	+0.1	122	10.6	-10.3
A. # w/LDL =<100	1	0.1	0	0.0	+0.1	67	5.8	-5.7
B. # w/LDL 101-129	2	0.1	1	0.1	+0.1	55	4.8	-4.6
Active Adult Diabeti	a							
Patients	1,096		1,000			939		
Patients	1,090		1,000			939		
# w/Lipid Profile OR TG & HDL & LDL								
recorded	507	46.3	5	0.5	+45.8	383	40.8	+5.5
# w/ LDL done	395	36.0	1	0.1	+35.9	158	16.8	+19.2
# w/LDL <130	2	0.2	1	0.1	+0.1	119	12.7	
A. # w/LDL =<100	1	0.1	0	0.0	+0.1	64	6.8	-6.7
B. # w/LDL 101-129	1	0.1	1	0.1	-0.0	55	5.9	-5.8

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Diabetes: Nephropathy Assessment

#### Denominator(s):

All User Population patients diagnosed with diabetes prior to the Report Period.

GPRA Denominator: Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes prior to the Report Period, AND at least 2 visits during the Report Period, AND 2 DM-related visits ever. Active Adult Diabetic patients, defined by meeting the following criteria: 1) who are 19 or older at the beginning of the Report Period, 2) whose first ever DM diagnosis occurred prior to the Report Period; 3) who had at least 2 DM related visits ever, 4) at least one encounter with DM POV in a primary clinic with a primary provider during the Report Period; and 5) never have had a creatinine value greater than 5.

### Numerator(s):

GPRA Numerator: Patients with positive urine protein test or, if urine protein test is negative, any microalbuminuria test, regardless of result, during the Report period.

Patients with Estimated GFR with result during the Report period. Patients who have had 1) positive urine protein test or, if urine protein test is negative, any microalbuminuria test, regardless of result AND 2) an Estimated GFR with result during the Report period.

First DM Purpose of Visit 250.00-250.93 recorded in the V POV file prior to the Report period. For microalbuminuria and positive urine protein, CRS searches for last microalbuminuria test done during the Report period, regardless of result. If none found, searches for last urine protein test with positive (Y) value in same time period. Positive value for urine protein is defined as: 1) First character of result is "P", "p", "M", "m", "L", "l", "S", or "s"; 2) Contains a + sign; 3) Contains a > symbol; 4) numeric value (if the result is a number) is > (greater than) 29. 1) Urine protein defined as: LOINC taxonomy; site-populated taxonomy DM AUDIT URINE PROTEIN TAX. 2) Microalbuminuria defined as: CPT codes 82043, 82044; LOINC taxonomy; site-populated taxonomy DM AUDIT MICROALBUMINURIA TAX or DM AUDIT A/C RATIO taxonomy. 3) Estimated GFR defined as site-populated taxonomy BGP GPRA ESTIMATED GFR TAX, LOINC code 33914-3.

During FY 2006, maintain the proportion of patients with diagnosed diabetes assessed for nephropathy at the FY 2005 level.

Assessment: IHS FY Performance: FY 2004 - 42.0%, FY 2003 - 37.5%; IHS 2010 Goal: 70%

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Diabetes: Nephropathy Assessment (con't)

	PORT RIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	0/0	CHG from BASE %
User Pop w/ DM DX prior to Report Period 1	,986		1,849			1,570		
<pre># w/pos urine protein or any microalbuminuria</pre>	716	36.1	198	10.7	+25.3	0	0.0	+36.1
# w/est GFR						_		
<pre>with result # w/both urine protein/</pre>	379	19.1	25	1.4	+17.7	0	0.0	+19.1
micro AND GFR	222	11.2	4	0.2	+11.0	0	0.0	+11.2
Active Diabetic Pts (GPRA) 1	,412		1,304			1,156		
# w/pos urine protein o	r							
any microalbuminuria (GPRA)	705	49.9	181	13.9	+36.0	0	0.0	+49.9
# w/est GFR	703	10.0	101	13.7	130.0	O	0.0	, 10.0
with result	353	25.0	23	1.8	+23.2	0	0.0	+25.0
<pre># w/both urine protein/ micro AND GFR</pre>	219	15.5	4	0.3	+15.2	0	0.0	+15.5
Active Adult Diabetic								
Patients 1	,096		1,000			939		
<pre># w/pos urine protein or any</pre>								
microalbuminuria	633	57.8	144	14.4	+43.4	0	0.0	+57.8
# w/est GFR with result	279	25.5	19	1.9	+23.6	0	0.0	+25.5
<pre># w/both urine protein/ micro AND GFR</pre>	188	17.2	4	0.4	+16.8	0	0.0	+17.2

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Diabetic Retinopathy

### Denominator(s):

All User Population patients diagnosed with diabetes prior to the Report period.

GPRA Denominator: Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes prior to the Report Period, AND at least 2 visits during the Report Period, AND 2 DM-related visits ever. Active Adult Diabetic patients, defined by meeting the following criteria: 1) who are 19 or older at the beginning of the Report Period, 2) whose first ever DM diagnosis occurred prior to the Report Period; 3) who had at least 2 DM related visits ever, 4) at least one encounter with DM POV in a primary clinic with a primary provider during the Report period; and 5) never have had a creatinine value greater than 5.

### Numerator(s):

GPRA Numerator: Patients receiving a qualified retinal evaluation during the Report Period, or a documented refusal of a diabetic retinal exam. A: Patients receiving diabetic retinal exam (or documented refusal) during the Report Period.

B: Patients receiving other eye exams during the Report Period.

Qualified retinal evaluation\* is defined as: (1) diabetic retinal exam or documented refusal or (2) other eye exam.

Diabetic retinal exam defined as: Clinic Code A2 Diabetic Retinopathy or Exam Code 03 Diabetic Eye Exam or Refusal Exam 03.

Other Eye Exam defined as: (1) Non-DNKA (did not keep appointment) visits to ophthalmology, optometry or qualifying\* tele-ophthalmology retinal evaluation clinics (i.e. JVN, Inoveon, EyeTel) or (2) non-DNKA visits to an optometrist or ophthalmologist. Searches for the following codes in the following order: Clinic Codes 17, 18, 64; Provider Code 24, 79, 08; CPT 92002, 92004, 92012, 92014, 92015.

\*Qualified retinal evaluation: The following methods are qualified for this measure:

- Dilated retinal examination by an optometrist or ophthalmologist
- 7 standard fields steroscopic photos (ETDRS) evaluated by an optometrist or ophthalmologist
  - Any photographic method validated to ETDRS, i.e. JVN, Inoveon, EyeTel

During FY 2006, maintain the proportion of patients with diagnosed diabetes who receive an annual retinal examination at designated sites at the FY 2005 level and establish the baseline of patients with diagnosed diabetes who receive an annual retinal examination of all sites.

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Eye Exam: IHS Performance: FY 2004 National Rate - 47.0%, Designated Site Rate - 55.0%, FY 2003 - 49%; IHS 2010 Goal: 70%

	REPORT PERIOD		PREV YR PERIOD		CHG from PREV YR %			CHG from BASE %
User Pop w/ DM DX pric to report period			1,849			1,570		
<pre># w/Retinal Evaluation or refusal A. # w/ DM Retinal example</pre>	875	44.1	810	43.8	+0.3	718	45.7	-1.7
or refusal B. # w/Other		5.7	187	10.1	-4.4	208	13.2	-7.6
Eye Exams	762	38.4	623	33.7	+4.7	510	32.5	+5.9
Active Diabetic Pts (GPRA)	1,412		1,304			1,156		
<pre># w/Retinal Evaluation or refusal (GPRA) A. # w/ DM Retinal example</pre>	806	57.1	748	57.4	-0.3	669	57.9	-0.8
or refusal  B. # w/Other		8.0	186	14.3	-6.3	204	17.6	-9.6
Eye Exams	693	49.1	562	43.1	+6.0	465	40.2	+8.9
Active Adult Diabetic Patients	1,096		1,000			939		
<pre># w/Retinal Evaluation or refusal A. # w/ DM Retinal exa</pre>	695	63.4	635	63.5	-0.1	595	63.4	+0.0
or refusal  B. # w/Other	109	9.9	176	17.6	-7.7	189	20.1	-10.2
Eye Exams	586	53.5	459	45.9	+7.6	406	43.2	+10.2

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

Diabetes: Access to Dental Services

### Denominator(s):

Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes prior to the Report Period, AND at least 2 visits during the Report Period, AND 2 DM-related visits ever

### Numerator(s):

Patients with documented dental visit during the Report period, including refusals in past year.

A: Patients with documented refusal.

For non-CHS dental visits, searches for V Dental ADA codes 0000 or 0190 or VExam 30 or Refusal Exam 30. For CHS dental visits, searches for any visit with an ADA code. CHS visit defined as Type code of C in Visit file.

During FY 2006, maintain the proportion of patients with diagnosed diabetes who obtain access to dental services at the FY 2005

IHS Performance: FY 2004 - 37.0%, FY 2003 - 36%; HP 2010 Goal: 75%

	REPORT PERIOD	0/0	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
Active Diabetic Pts	1,412		1,304			1,156		
# w/dental visit								
in past yr	380	26.9	325	24.9	+2.0	283	24.5	+2.4
A. # Refusals w/ % o	f Total							
Dental Visits	2	0.5	0	0.0	+0.5	0	0.0	+0.5

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Access to Dental Services

Denominator(s):

GPRA Denominator: All patients in the User Population.

Numerator(s):

GPRA Numerator: Patients with documented dental visit during the Report

period, including refusals in past year.

A: Patients with documented refusal.

For non-CHS dental visits, searches for V Dental ADA codes 0000 or 0190 or VExam 30 or Refusal Exam 30. For CHS dental visits, searches for any visit with an ADA code. CHS visit defined as Type code of C in Visit file.

During FY 2006, maintain the proportion of patients that obtain access to dental services at the FY 2005 level.

IHS Performance: FY 2004 - 24.0%, FY 2003 - 25%; IHS 2010 Goal: 40%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# User Pop (GPRA)	24,005		23,943			23,717		
<pre># w/dental visit in past yr</pre>								
(GPRA)	3,907	16.3	3,960	16.5	-0.3	4,251	17.9	-1.6
A. # Refusals w/	% of Total							
Dental Visits	2	0.1	0	0.0	+0.1	0	0.0	+0.1

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

Dental Sealants

Denominator(s):

No denominator. This measure is a total count only, not a percentage.

Numerator(s):

GPRA Numerator: The total number of dental sealants during the Report Period.

Age of the patient is calculated at the beginning of the Report Period. Sealants defined as V Dental ADA code 1351.

During FY 2006, maintain the number of sealants placed per year in American Indian and Alaska Native patients at the FY 2005 level.

IHS Performance: FY 2004 - 287,158 (reported from NPIRS)

	REPORT PERIOD	PREV YR PERIOD	CHG from PREV YR	BASE PERIOD	CHG from BASE
Total # of Sealant Documented (GPRA)	2,089	2,845	-756	5,554	-3,465
# Dental Sealants pts <12 yrs	documented 1,079	1,794	-715	3,747	-2,668
<pre># Dental Sealants   pts 12-18 yrs</pre>	documented 864	700	+164	1,667	-803
<pre># Dental Sealants pts &gt;18 yrs</pre>	documented 146	351	-205	140	+6

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

Topical Fluoride

### Denominator(s):

No denominator. This measure is a total count only, not a percentage.

### Numerator(s):

GPRA Numerator: The total number of patients with at least one topical fluoride treatment during the Report Period.

The total number of appropriate topical fluoride applications based on a maximum of four per patient per year.

Topical fluoride application defined as: 1) V Dental ADA codes 1201, 1203, 1204, 1205; or 2) V POV V07.31. A maximum of one application per patient per visit is allowed. A maximum of four topical fluoride applications are allowed per patient per year for the applications measure.

During FY 2006, maintain the number of American Indian and Alaska Native patients receiving at least one topical fluoride application at the FY 2005 level.

	REPORT PERIOD	PREV YR PERIOD	CHG from PREV YR	BASE PERIOD	CHG from BASE
Total # of Patient least 1 Topical F App (GPRA)	•	1,329	-83	555	+691
Total # of Topical Applications	Fluoride 1,520	1,580	-60	585	+935

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Adult Immunizations: Influenza

### Denominator(s):

Active Clinical patients ages 50 or older.

A: Active Clinical patients ages 50-64.

B: GPRA Denominator. Active Clinical patients ages 65 and older. Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes at least one year prior to the end of Report period, AND at least 2 visits in the past year, AND 2 DM-related visits ever.

All User Population patients ages 50 or older.

A: All User Population patients ages 50-64.

B: All User Population patients ages 65 and older.

### Numerator(s):

GPRA Numerator: Patients with Influenza vaccine documented during the Report Period, including refusals in past year.

Documented patient refusals (REF) or not medically indicated (NMI)

Age of the patient is calculated at the beginning of the Report Period. Influenza vaccine defined as: 1) Immunization (CVX) codes: 88-Influenza Virus Vaccine, NOS; 15 Inf Virus Vac SV; 16 Inf Virus Vac WV; 111 Inf Virus Vac Intranasal; 2) POV: V04.8, V04.81, or V06.6; 3) CPT: 90655-90660, 90724; 4) ICD Procedure code: 99.52; 5) Refusal Immunization 88, 111, 15, 16.

In FY 2006, maintain FY 2005 rate for influenza vaccination levels among non-institutionalized adults aged 65 years and older.

>65 Vaccine Rate: IHS Performance: FY 2004 - 54.0%, FY 2003 - 51%; HP 2010 Goal: 90%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
Active Clinical Patier ages 50 or older			2,810			2,611		
Total # w/Flu vaccine documented A. # Refusals w/ % of	1,906	64.7	1,517	54.0	+10.7	1,250	47.9	+16.8
Total IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Adult Immunizations: Influenza (con't)

			/					
			PREV YR PERIOD		CHG from PREV YR %			
A. Active Clinical Pages 50-64			1,656			1,537		
Total # w/Flu vaccine documented A. # Refusals w/ % of Total IZ	1,090	62.5	828	50.0	+12.5	647	42.1	+20.4
	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. Active Clinical Pa								
(GPRA)	1,203		1,154			1,074		
Total # w/Flu vaccine documented								
(GPRA) A. # Refusals w/ % or		67.8	689	59.7	+8.1	603	56.1	+11.7
Total IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Active Diabetic Pts	1,412		1,304			1,156		
Total # w/Flu vaccing documented	998	70.7	759	58.2	+12.5	622	53.8	+16.9
A. # Refusals w/ % of Total IZ	1	0.1	0	0.0	+0.1	0	0.0	+0.1
# User Population 50 and older	3,711		3,566			3,249		
	2,014	54.3	1,590	44.6	+9.7	1,287	39.6	+14.7
A. # of Refusals w/ Total IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Adult Immunizations: Influenza (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
A. # User Population ages 50-64	2,246		2,168			1,959		
Total # w/Flu vaccin documented A. # Refusals w/ % o	1,156 f			40.4		671	34.3	+17.2
Total IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # User Population 65 and older	1,465		1,398			1,290		
Total # w/Flu vaccin documented A. # of Refusals w/	858	58.6	715	51.1	+7.4	616	47.8	+10.8
Total IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

Adult Immunizations: Pneumovax

### Denominator(s):

GPRA Denominator: All Active Clinical patients ages 65 or older. Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes prior to the Report Period, AND at least 2 visits during the Report Period, AND 2 DM-related visits ever. All User Population patients ages 65 and older at beginning of Report period.

#### Numerator(s):

GPRA Numerator: Patients with Pneumococcal vaccine documented at any time before the end of the Report Period, including refusals in past year. Documented patient refusals (REF) or not medically indicated (NMI). Diabetic patients with pneumovax documented in past 5 years, including refusals in past year.

Age of the patient is calculated at the beginning of the Report Period. Pneumovax definitions: 1) Immunization (CVX) codes: 33 Pneumo Polysaccaride; 100 Pneumo Conjugate; 109 Pneumo NOS; 2) POV: V06.6; V03.89, V03.82; 3) V Procedure: 99.55; 4) CPT: 90669, 90732; 5) Refusal Immunization 33, 100, 109.

In FY 2006, increase the rate for pneumococcal vaccination levels among adult patients age 65 years and older to 72%.

>65 Vaccine Rate: IHS Performance - FY 2004 - 69.0%, FY 2003 - 65%; HP 2010 Goal: 90%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts ages 65 & older (GPRA)	1,203		1,154			1,074		
Total # w/Pneumovax documented								
(GPRA)	971	80.7	903	78.2	+2.5	779	72.5	+8.2
A. # Refusals w/ % o Total IZ	1	0.1	0	0.0	+0.1	0	0.0	+0.1

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Adult Immunizations: Pneumovax (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
Active Diabetic Pts	1,412		1,304			1,156		
Total # w/Pneumovax documented A. # Refusals w/ % of	•	84.8	1,073	82.3	+2.5	939	81.2	+3.5
Total IZ		0.0	0	0.0	+0.0	0	0.0	+0.0
Total # w/Pneumovax documented in past 5 yrs A. # Refusals w/ % of Total IZ		71.0	898		+2.2	877		-4.8 +0.0
# User Population ages 65 & older	·	0.0	1,398	0.0		1,290	0.0	
Total # w/Pneumovax								
<pre>documented A. # Refusals w/ % of</pre>	•	70.9	962	68.8	+2.0	808	62.6	+8.2
Total IZ	1	0.1	0	0.0	+0.1	0	0.0	+0.1

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

#### Childhood Immunizations

### Denominator(s):

GPRA Denominator: Active Clinical patients ages 19-35 months at end of Report period.

User Population patients ages 19-35 months.

Patients active in the Immunization Package who are 19-35 months at end of Report period. NOTE: Only values for the Current Period will be reported for this denominator since currently there is not a way to determine if a patient was active in the Immunization Package during the Previous Year or Baseline Periods.

#### Numerator(s):

GPRA Numerator: Patients who have received the 4:3:1:3:3 combination (i.e. 4 DTaP, 3 Polio, 1 MMR, 3 HiB, 3 Hepatitis B), including refusals, contraindications, and evidence of disease.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a contraindication, or (3) a documented NMI (not medically indicated) refusal.

Patients who have received 4 doses of DTaP ever, including refusals, contraindications, and evidence of disease.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a contraindication, or (3) a documented NMI (not medically indicated) refusal.

Patients who have received 3 doses of Polio ever, including refusals, contraindications, and evidence of disease.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a contraindication, or (3) a documented NMI (not medically indicated) refusal.

Patients who have received 1 dose of MMR ever, including refusals, contraindications, and evidence of disease.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a contraindication, or (3) a documented NMI (not medically indicated) refusal.

Patients who have received 3 doses of HiB ever, including refusals, contraindications, and evidence of disease.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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contraindication, or (3) a documented NMI (not medically indicated) refusal.

Patients who have received 3 doses of Hepatitis B vaccine ever, including refusals, contraindications, and evidence of disease.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a contraindication, or (3) a documented NMI (not medically indicated) refusal.

Patients who have received 1 dose of Varicella ever, including refusals, contraindications, and evidence of disease.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a contraindication, or (3) a documented NMI (not medically indicated) refusal.

Patients who have received all of their childhood immunizations, defined as 4 DTaP, 3 Polio, 1 MMR, 3 HiB, 3 Hepatitis B, 1 Varicella (i.e., 4:3:1:3:3:1), including refusals, contraindications, and evidence of disease.

Immunization Program Numerator: Patients who have received all of their childhood immunizations, defined as 4 DTaP, 3 Polio, 1 MMR, 3 HiB, 3 Hepatitis B, 1 Varicella (i.e., 4:3:1:3:3:1) NOT including refusals, contraindications, and patients with evidence of disease.

Immunization Program Numerator: Patients who have received the 4:3:1:3:3 combination (i.e. 4 DTaP, 3 Polio, 1 MMR, 3 HiB, 3 Hepatitis B), NOT including refusals, contraindications, and patients with evidence of disease.

Age of the patient is calculated at the beginning of the Report period. Therefore the age range will be adjusted to 7-23 months. Because IZ data comes from multiple sources, any IZ codes documented on dates within 10 days of each other will be considered as the same immunization.

Active Immunization Package Patients denominator: Same as User Pop definition EXCEPT includes only patients flagged as active in the Immunization Package. NOTE: Only values for the Current Period will be reported for this denominator since currently there is not a way to determine if a patient was active in the Immunization Package during the Previous Year or Baseline Periods.

Dosage and types of immunization definitions:

- 4 doses of DTaP: 1) 4 DTaP/DTP/Tdap; 2) 1 DTaP/DTP/Tdap and 3 DT; 3) 1 DTaP/DTP/Tdap and 3 each of Diphtheria and Tetanus; 4) 4 DT and 4 Pertussis; 5) 4 Td and 4 Pertussis; or 6) 4 each of Diphtheria, Tetanus, and Pertussis.

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

- 3 doses of Polio: 1) 3 OPV; 2) 3 IPV; or 3) combination of OPV & IPV totaling 3 doses.
- 1 dose of MMR: 1) MMR; 2) 1 M/R and 1 Mumps; 3) 1 R/M and 1 Measles; or 4) 1 each of Measles, Mumps, and Rubella.
  - 3 doses of Hep B
  - 3 doses of HIB
  - 1 dose of Varicella

Except for the Immunization Program Numerators, refusals, evidence of disease, and contraindications for individual immunizations will also count toward meeting the definition, as defined below.

- Each immunization must be refused and documented separately. For example, if a patient refused Rubella only, then there must be either an immunization, contraindication, or separate refusal for the Measles and Mumps immunizations.
- For immunizations where required number of doses is >1, only one refusal is necessary to be counted in the numerator. For example, if there is a single refusal for Hepatitis B, the patient will be included in the numerator.
- Evidence of disease will be checked for at any time in the child's life (prior to the end of the Report period.)
- To be counted in sub-numerator A, a patient must have a REF refusal in PCC or a Parent or Patient Refusal in the IZ program for any of the immunizations in the numerator. For example, if a patient refused Rubella only but had immunizations for Measles and Mumps, the patient would be included in sub-numerator A.
- To be counted in sub-numerator B, a patient must have evidence of disease, a contraindication, or an NMI refusal for any of the immunizations in the numerator. For example, if a patient was Rubella immune but had a Measles and Mumps immunization, the patient would be included in sub-numerator B.
- Refusal Definitions: Parent/Patient Refusal in Immunization package or PCC Refusal type REF or NMI for IZ codes: DTaP: 20, 50, 106, 107, 110; DTP: 1, 22, 102; Tdap: 115; DT: 28; Td: 9; Tetanus: 35, 112; Pertussis: 11: OPV: 2, 89; IPV: 10, 89, 110; MMR: 3, 94: M/R: 4; R/M: 38; Measles: 5; Mumps: 7; Rubella: 6; HiB: 22, 46-49; 50, 51, 102; Hepatitis

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B: 8, 42-45, 51, 102, 104, 110; Varicella: 21, 94.

NOTE: In the definitions for all immunizations shown below, the Immunization Program Numerators will include only CVX and CPT codes.

- DTaP IZ definitions: 1) Immunization (CVX) codes: 20, 50, 106, 107, 110; 2) POV V06.1; 3) CPT: 90698, 90700, 90721, 90723, 90749.
- DTP IZ definitions: 1) Immunization (CVX) codes: 1, 22, 102; 2) POV: V06.1, V06.2, V06.3; 3) CPT: 90701, 90711, 90720; 4) Procedure 99.39.
  - Tdap IZ definition: 1) Immunization (CVX) code: 115; 2) CPT 90715.
- DT IZ definitions: 1) Immunization (CVX) code 28; 2) POV V06.5; 3) CPT 90702.
- Td IZ definitions: 1) Immunization (CVX) code 9; 2) POV V06.5; 3) CPT 90718.
- Diphtheria IZ definitions: 1) POV V03.5; 2) CPT 90719; 3) Procedure 99.36. Diphtheria evidence of disease definitions: POV or PCC Problem List (active or inactive) V02.4, 032\*.
- Tetanus definitions: 1) Immunization (CVX) codes: 35, 112; 2) POV V03.7, 3) CPT 90703; 4) Procedure 99.38. Tetanus evidence of disease definition: POV or PCC Problem List (active or inactive) 037\*.
- Pertussis definitions: 1) Immunization (CVX) code 11; 2) POV V03.6; 3) Procedure 99.37. Pertussis evidence of disease definition: POV or PCC Problem List (active or inactive) 033\*.
- OPV definitions: 1) Immunization (CVX) codes: 2, 89; 2) CPT 90712. OPV contraindication definitions: POV: 279, V08, 042, 200-202, 203.0, 203.1, 203.8, 204-208.
- IPV definitions: 1) Immunization (CVX) codes: 10, 89, 110; 2) POV V04.0, V06.3; 3) CPT: 90698, 90711, 90713, 90723; 4) Procedure 99.41. IPV evidence of disease definitions: POV or PCC Problem List (active or inactive): V12.02, 045\*, 138, 730.70-730.79.
- MMR definitions: 1) Immunization (CVX) codes: 3, 94; 2) POV V06.4; 3) CPT: 90707, 90710; 4) Procedure 99.48. MMR contraindication definitions: POV: 279, V08, 042, 200-202, 203.0, 203.1, 203.8, 204-208.
  - M/R definitions: 1) Immunization (CVX) code 4; 2) CPT 90708.
  - R/M definitions: 1) Immunization (CVX) code 38; 2) CPT 90709.

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- Measles definitions: 1) Immunization (CVX) code 5; 2) POV V04.2; 3) CPT 90705; 4) Procedure 99.45. Measles evidence of disease definition: POV or PCC Problem List (active or inactive) 055\*.
- Mumps definitions: 1) Immunization (CVX) code 7; 2) POV V04.6; 3) CPT 90704; 4) Procedure 99.46. Mumps evidence of disease definition: POV or PCC Problem List (active or inactive) 072\*.
- Rubella definitions: 1) Immunization (CVX) code 6; 2) POV V04.3; 3) CPT 90706; 4) Procedure 99.47. Rubella evidence of disease definitions: POV or PCC Problem List (active or inactive) 056\*, 771.0.
- HiB definitions: 1) Immunization (CVX) codes: 22, 46-49, 50, 51, 102; 2) POV V03.81; 3) CPT: 90645-90648, 90698, 90720-90721, 90748. HiB evidence of disease definitions: POV or PCC Problem List (active or inactive) 038.41, 041.5, 320.0, 482.2.
- Hepatitis B definitions: 1) Immunization (CVX) codes: 8, 42-45, 51, 102, 104, 110; 2) CPT: 90636, 90723, 90731, 90740, 90743-90748. Hepatitis B evidence of disease definitions: POV or PCC Problem List (active or inactive): V02.61, 070.2, 070.3.
- Varicella definitions: 1) Immunization (CVX) codes: 21, 94; 2) POV V05.4; 3) CPT: 90710, 90716. Varicella evidence of disease definitions: POV or PCC Problem List (active or inactive) 052\*, 053\*. Varicella contraindication definitions: POV: 279, V08, 042, 200-202, 203.0, 203.1, 203.8, 204-208.

During FY 2006, maintain baseline rates for recommended immunizations for American Indian/Alaska Native children 19-35 months compared to FY 2005.

HP 2010 Goal: for 4:3:1:3:3 80%; for each individual IZ 90%

IHS Performance: FY 2004 - 72.0% (reported from IZ program)

REPORT % PREV YR % CHG from BASE % CHG from PERIOD PREV YR % PERIOD BASE %

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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('hildhood	Immunizations	(COn'+)
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	REPORT PERIOD		PREV YR PERIOD	왕	CHG from PREV YR %		%	CHG from BASE %
Active Clinical Pts								
19-35 months								
(GPRA)	545		538			568		
# w/ 4:3:1:3:3 combo								
Refusal (GPRA)	388	71.2	371	69.0	+2.2	357	62.9	+8.3
A. Refusals w/ % of Total all IZ	2	0.5	0	0.0	+0.5	0	0.0	+0.5
B. # w/ Dx/Contraind		0.5	O	0.0	10.5	U	0.0	10.5
Ref w/ % of	.,							
Total IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 4 doses DTaP								
or w/ Dx/ Contraind/Refusal	406	74 5	387	71.9	+2.6	399	70.2	+4.2
A. # Refusals w/ % o		71.5	307	,	.2.0	3,7,7	70.2	. 1.2
Total DTaP	1	0.2	0	0.0	+0.2	0	0.0	+0.2
B. # w/ Dx/Contraind	l/NMI							
Ref w/ % of								
Total DTaP	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 3 doses Polio								
or w/ Dx/								
Contraind/Refusal		84.4	447	83.1	+1.3	432	76.1	+8.3
A. # Refusals w/ % o								
Total Polio	2	0.4	0	0.0	+0.4	0	0.0	+0.4
<pre>B. # w/ Dx/Contraind Ref w/ % of</pre>	I/NMT							
Total Polio	1	0.2	0	0.0	+0.2	2	0.5	-0.2
10001 10110	_	0.2	O	0.0	.0.2	2	0.5	0.2
# w/ 1 dose MMR or								
w/ Dx/Contraind/								
Refusal A. # Refusals w/ % o	453	83.1	465	86.4	-3.3	4'/'/	84.0	-0.9
Total MMR	1	0.2	0	0.0	+0.2	0	0.0	+0.2
B. # w/Dx/Contraind/		0.2	· ·	0.0	.0.2	· ·	0.0	
Ref w/ % of								
Total MMR	0	0.0	0	0.0	+0.0	2	0.4	-0.4
W / 2 1 WTD								
<pre># w/ 3 doses HIB or w/Dx/Contraind/</pre>								
Refusal	431	79.1	434	80.7	-1.6	435	76.6	+2.5
A. # Refusals w % of								
Total HIB	1	0.2	0	0.0	+0.2	0	0.0	+0.2
B. # w/ Dx/Contraind	l/NMI							
Ref w/ % of	•	0 0	^	0 0	. 0 . 0	^	0 0	. 0 . 0
Total HIB	0	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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	PORT RIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		90	CHG from BASE %
# w/ 3 doses Hep B or								
<pre>w/ Dx/Contraind/ Refusal A. # Refusals w/ % of Total Hep B B. # w/ Dx/Contraind/NMI Ref w/ % of Total HEP B</pre>	421	77.2	433	80.5	-3.2	429	75.5	+1.7
	1	0.2	0	0.0	+0.2	0	0.0	+0.2
	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 1 dose Varicella or								
<pre>w/ Dx/Contraind/ Refusal A. # Refusals w/ % of</pre>	428	78.5	362	67.3	+11.2	330	58.1	+20.4
Total Varicella B. # w/ Dx/Contraind/NM	1	0.2	0	0.0	+0.2	0	0.0	+0.2
Ref w/ % of Total Varicella	2	0.5	6	1.7	-1.2	28	8.5	-8.0
<pre># w/ All IZ (4:3:1:3:3:   or w/Dx/Contraind/   Refusal</pre>	1) 373	68.4	303	56.3	+12.1	271	47.7	+20.7
		00.1	303	30.3	112.1	271	17.7	120.7
# w/ All 4:3:1:3:3:1 IZ Only Patients Actually Immunized		67.5	294	54.6	+12.9	251	44.2	+23.3
# w/ 4:3:1:3:3 combo - Only Patients Actually			0.55			0.5.4		
Immunized	386	70.8	367	68.2	+2.6	356	62.7	+8.1
User Pop Pts 19-35 months	668		696			704		
A. Refusals w/ % of Total all IZ B. # w/ Dx/Contraind/NMI Ref w/ % of	402	60.2	384	55.2	+5.0	364	51.7	+8.5
		0.5	0	0.0	+0.5	0	0.0	+0.5
	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 4 doses DTaP or w/ Dx/								
Contraind/Refusal A. # Refusals w/ % of	423	63.3	402	57.8	+5.6	408	58.0	+5.4
	4	0.9	1	0.2	+0.7	0	0.0	+0.9

Total DTaP	0	0.0	0	0.0	+0.0	0	0.0	+0.0
<pre># w/ 3 doses Polio or w/Dx/Contraind/</pre>								
	482	72.2	468	67.2	+4.9	444	63.1	+9.1
Total Polio	_	0.6	0	0.0	+0.6	0	0.0	+0.6
<pre>B. # w/ Dx/Contraind/NM Ref w/ % of</pre>	I							
Total Polio	2	0.4	0	0.0	+0.4	2	0.5	-0.0
<pre># w/ 1 dose MMR or w/ Dx/Contraind/</pre>								
Refusal	474	71.0	489	70.3	+0.7	493	70.0	+0.9
A. # Refusals w/ % of Total MMR	1	0.2	0	0.0	+0.2	0	0.0	+0.2
<pre>B. # w/Dx/Contraind/NMI Ref w/ % of</pre>								
Total MMR	2	0.4	1	0.2	+0.2	2	0.4	+0.0
# w/ 3 doses HIB or								
w/Dx/Contraind/ Refusal	451	67.5	457	65.7	+1.9	448	63.6	+3.9
A. # Refusals w % of Total HIB	2	0.4	0	0.0	+0.4	0	0.0	+0.4
B. # w/ Dx/Contraind/NM Ref w/ % of	I							
Total HIB	0	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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('hildhood	Immunizations	(COn'+)
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	PORT RIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		90	CHG from BASE %
<pre># w/ 3 doses Hep B or w/ Dx/Contraind/</pre>	4.4.0	66.0	450		.0.5	4.40	60.5	. 2. 5
Refusal A. # Refusals w/ % of Total Hep B B. # w/ Dx/Contraind/NMI Ref w/ % of Total Hep B	442	66.2	457	65.7	+0.5	440	62.5	+3.7
	2	0.5	0	0.0	+0.5	0	0.0	+0.5
	0	0.0	0	0.0	+0.0	0	0.0	+0.0
<pre># w/ 1 dose Varicella of w/ Dx/Contraind/Ref A. # Refusals w/ % of</pre>	r 445	66.6	377	54.2	+12.5	338	48.0	+18.6
Total Varicella B. # w/ Dx/Contraind/NM	1 I	0.2	0	0.0	+0.2	0	0.0	+0.2
Ref w/ % of Total Varicella	5	1.1	8	2.1	-1.0	30	8.9	-7.8
# w/ All IZ (4:3:1:3:3:	1)							
or w/Dx/Contraind/ Refusal	383	57.3	310	44.5	+12.8	275	39.1	+18.3
<pre># w/ All 4:3:1:3:3:1 IZ Only Patients Actually Immunized</pre>		56.6	301	43.2	+13.3	254	36.1	+20.5
# w/ All 4:3:1:3:3 combo		59.9	380	54.6	+5.3	363	51.6	+8.3
Active Imm Pkg Pts 19-35 months	473		0			0		
# w/ 4:3:1:3:3 combo								
or w/ Dx/ Contraind/ Refusal A. Refusals w/ % of Total all IZ B. # w/ Dx/Contraind/NMI Ref w/ % of Total IZ	392	82.9	0	0.0	+82.9	0	0.0	+82.9
	0	0.0	0	0.0	+0.0	0	0.0	+0.0
	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 4 doses DTaP or w/ Dx/								
Contraind/Refusal A. # Refusals w/ % of	409	86.5	0	0.0	+86.5	0	0.0	+86.5
	1 I	0.2	0	0.0	+0.2	0	0.0	+0.2

Total DTaP	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 3 doses Polio or w/ Dx/								
Contraind/Refusal A. # Refusals w/ % of	440	93.0	0	0.0	+93.0	0	0.0	+93.0
Total Polio  B. # w/ Dx/Contraind/NI Ref w/ % of	0 MI	0.0	0	0.0	+0.0	0	0.0	+0.0
Total Polio	2	0.5	0	0.0	+0.5	0	0.0	+0.5
<pre># w/ 1 dose MMR or w/ Dx/Contraind/</pre>								
Refusal	445	94.1	0	0.0	+94.1	0	0.0	+94.1
<pre>A. # Refusals w/ % of   Total MMR B. # w/Dx/Contraind/NME Ref w/ % of</pre>	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Total MMR	1	0.2	0	0.0	+0.2	0	0.0	+0.2
<pre># w/ 3 doses HIB or w/Dx/Contraind/</pre>								
Refusal A. # Refusals w % of	430	90.9	0	0.0	+90.9	0	0.0	+90.9
Total HIB  B. # w/ Dx/Contraind/NI Ref w/ % of	0 MI	0.0	0	0.0	+0.0	0	0.0	+0.0
Total HIB	0	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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### Childhood Immunizations (con't)

	REPORT PERIOD	%	PREV YR PERIOD	00	CHG from PREV YR %		%	CHG from BASE %
<pre># w/ 3 doses Hep B o w/ Dx/Contraind/</pre>	r							
Refusal	419	88.6	0	0.0	+88.6	0	0.0	+88.6
A. # Refusals w/ % o Total Hep B	oī O	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind Ref w/ % of	/NMI							
Total HEP B	0	0.0	0	0.0	+0.0	0	0.0	+0.0
<pre># w/ 1 dose Varicell w/ Dx/Contraind/</pre>	a or							
Refusal	421	89.0	0	0.0	+89.0	0	0.0	+89.0
A. # Refusals w/ % o Total Varicella B. # w/ Dx/Contraind	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Ref w/ % of Total Varicella	3	0.7	0	0.0	+0.7	0	0.0	+0.7
# w/ All IZ (4:3:1:3	:3:1)							
or w/Dx/Contraind/ Refusal	374	79.1	0	0.0	+79.1	0	0.0	+79.1
# w/ All 4:3:1:3:3:1 Only Patients Actua								
Immunized		78.2	0	0.0	+78.2	0	0.0	+78.2
# w/ 4:3:1:3:3 combo								
Immunized	-	82.9	0	0.0	+82.9	0	0.0	+82.9

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Cancer Screening: Pap Smear Rates

#### Denominator(s):

GPRA Denominator: Female Active Clinical patients ages 21 through 64 without documented history of Hysterectomy.

Female User Population patients ages 21 through 64 without a documented history of Hysterectomy.

#### Numerator(s):

GPRA Numerator: Patients with a Pap Smear documented in the past 3 years, including refusals in past year.

A: Patients with documented refusal in past year.

Age of the patient is calculated at the beginning of the Report period. Hysterectomy defined as V Procedure: 68.4-68.8 or CPT 51925, 56308, 58150, 58152, 58200-58294, 58550-54, 58951, 58953-58954, 59135, 59525. Pap Smear definitions: 1) V Lab: Pap Smear; 2) POV: V76.2 Screen Mal Neop-Cervix, V72.31 Gynecological Examination, Pap Cervical Smear as Part of General GYN exam, V72.32 Gynecological Examination, Pelvic Examination (annual) (periodic), V72.3 Gynecological Examination (old code, to be counted for visits prior to 10/1/04 only), V76.47 Vaginal Pap Smear for Post-Hysterectomy Patients, or V76.49 Pap Smear for Women w/o a Cervix; 3) V Procedure: 91.46; 4) V CPT: 88141-88167, 88174-88175, Q0091 Screening Pap Smear; 5) Women's Health: procedure called Pap Smear; 6) LOINC taxonomy; 7) site-populated taxonomy BGP GPRA PAP SMEAR; 8) Refusal (in past year) Lab Test Pap Smear.

During FY 2006, maintain the proportion of female patients ages 21 through 64 without a documented history of hysterectomy who have had a Pap screen within the previous three years at the FY 2005 level.

IHS Performance - FY 2004 - 58.0%, FY 2003 - 61%; IHS 2010 Goal: 90%

	REPORT PERIOD	<b>ે</b>	PREV YR PERIOD	olo	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female Active Cl 21-64 years (GPRA)	inical 4,470		4,376			4,379		
# w/Pap Smear re w/in 3 years		60.0	0. 541		0.2	0.000		2.5
(GPRA) A. # Refusals	2,812	62.9	2,741	62.6	+0.3	2,908	66.4	-3.5
w/ % of Total P	ap 1	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Cancer Screening: Pap Smear Rates (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
# Female User Pop 21-64 years	6,078		6,028			5,880		
# w/Pap Smear rec	orded							
w/in 3 years	2,868	47.2	2,806	46.5	+0.6	2,979	50.7	-3.5
A. # Refusals								
w/ % of Total Pa	.p 2	0.1	0	0.0	+0.1	0	0.0	+0.1

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Cancer Screening: Mammogram Rates

#### Denominator(s):

GPRA Denominator: Female Active Clinical patients ages 52 through 64 without a documented history of bilateral mastectomy or two separate unilateral mastectomies.

Female User Population patients ages 52 through 64 without a documented history of bilateral mastectomy or two separate unilateral mastectomies.

#### Numerator(s):

 $\mbox{\fontfamily{1}{\sc GPRA}}$  Numerator: All patients who had a Mammogram documented in the past 2 years, including documented refusals in past year.

A: Patients with documented refusal in the past year.

Age of the patient is calculated at the beginning of the Report period. Bilateral mastectomy defined as: 1) V CPT: 19180.50 OR 19180 w/modifier 09950 (.50 and 09950 modifiers indicate bilateral); 19200.50 OR 19200 w/modifier 09950; 19220.50 OR 19220 w/modifier 09950; 19240.50 OR 19240 w/modifier 09950; 2) ICD Operation codes: 85.42; 85.44; 85.46; 85.48. Unilateral mastectomy defined as: Must have 2 separate occurrences for either CPT or procedure codes on 2 different dates of service. 1) V CPT: 19180, 19200, 19220, 19240; 2) ICD Operation codes: 85.41, 85.43, 85.45, 85.47; Screening Mammogram definitions: 1) V Radiology or V CPT: 76090 Mammogram; unilateral; 76091 Mammogram; bilateral; 76092 Mammogram; screening; G0206, Diagnostic Mammography, unilateral; G0204, Diagnostic Mammography, bilateral; G0202 Screening Mammography, bilateral; 2) POV: V76.11 screening mammogram for high risk patient; V76.12 other screening mammogram; 3) V Procedure: 87.36 Xerography of breast, 87.37 Other Mammography; 4) Women's Health: Screening Mammogram, Mammogram Dx Bilat, Mammogram Dx Unilat; 5) Refusal (in past year): V Radiology Mammogram for CPT 76090, 76091, 76092, G0206, G0204, G0202.

During FY 2006, maintain the proportion of female patients ages 50 through 64 who have had mammography screening within the last 2 years at the FY 2005 level.

IHS Performance: FY 2004 - 40.0%, FY 2003 - 40%; IHS 2010 Goal: 70%

REPORT % PREV YR % CHG from BASE % CHG from PERIOD PERIOD PREV YR % PERIOD BASE %

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Cancer Screening: Mammogram Rates (con't)

	EPORT	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# Female Active Clinic 52-64 (GPRA)	al 778		726			698		
<pre># w/Mammogram recorded w/in 2 years</pre>	l							
(GPRA)	398	51.2	356	49.0	+2.1	340	48.7	+2.4
A. # Refusals w/ % of Total Mammograms	1	0.3	0	0.0	+0.3	0	0.0	+0.3
# User Pop Women 52-64 years	952		902			851		
<pre># w/Mammogram recorded w/in 2 years A. # Refusals w/ % of</pre>	l 401	42.1	358	39.7	+2.4	340	40.0	+2.2
total Mammograms	1	0.2	0	0.0	+0.2	0	0.0	+0.2

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Colorectal Cancer Screening

#### Denominator(s):

GPRA Denominator: All Active Clinical patients ages 51-80 without a documented history of colorectal cancer.

All User Population patients ages 51-80 without any documented diagnosis of colorectal cancer.

#### Numerator(s):

GPRA Numerator: Patients who have had ANY CRC screening, defined as any of the following: 1) Fecal Occult Blood test in the past 2 years; 2) flexible sigmoidoscopy or double contrast barium enema in the past 5 years; or 3) colonoscopy in the past 10 years; or a documented refusal of any test in the past year.

A: Patients with documented refusal in the past year.

B: Patients with Fecal Occult Blood test (FOBT) in the past 2 years.

Patients with Rectal Exam in the past 2 years, including refusals in past year.

Age is calculated at the beginning of the Report period. Colorectal cancer defined as: POV: 153.\*, 154.0, 154.1, 197.5, V10.05. Screening defined as: 1. Fecal Occult Blood lab test (FOBT): CPT 82270, 82274, G0107, 89205, LOINC taxonomy, or site-populated taxonomy BGP GPRA FOB TESTS; 2. Flexible Sigmoidoscopy: V Procedure 45.24, 45.42; CPT 45330-45345, G0104; 3. Double contrast barium enema: CPT or VRad: 74270-74280, G0106, G0120; 4. Colonoscopy: V Procedure 45.22, 45.23, 45.25, V POV V76.51 Colon screening; CPT 44388-44394, 44397, 45355, 45378-45387, 45325 (old), G0105, G0121.

Rectal Exam defined as: 1. V POV V76.41; 2. V Procedure 48.24-29, 89.34; 3. V Exam 14 or refusal in past year for Exam 14.

Refusals in past year: 1. FOBT: V Lab Fecal Occult Blood test, V Radiology CPT 82270, 82274, G0107, 89205; 2. Flexible Sigmoidoscopy: V Radiology CPT 45330-45345, G0104; 3. Double contrast barium enema: V Radiology CPT: 74270-74280, G0106, G0120; 4. Colonoscopy: V Radiology CPT 44388-44394, 44397, 45355, 45378-45387, 45325 (old), G0105, G0121.

During FY 2006, establish baseline rate of colorectal screening for clinically appropriate patients ages 50 and older.

HP 2010 Goal: 50%

REPORT % PREV YR % CHG from BASE % CHG from PERIOD PERIOD PREV YR % PERIOD BASE %

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Colorectal Cancer Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
Active Clinical Pation 51-80 (GPRA)	ents 2,544		2,433			2,264		
<pre># w/ CRC screening   (GPRA) A. # Refusals w/ % o</pre>	440 f	17.3	482	19.8	-2.5	504	22.3	-5.0
Total CRC B. # w/FOB test in	1	0.2	0	0.0	+0.2	0	0.0	+0.2
past 2 years # w/ rectal exam in past 2 yrs or	90	3.5	239	9.8	-6.3	370	16.3	-12.8
refusal past year	573	22.5	495	20.3	+2.2	522	23.1	-0.5
Male Active Clinical 51-80	1,055		1,010			936		
# w/ CRC screening	153	14.5	122	12.1	+2.4	119	12.7	+1.8
A. # Refusals w/ % o Total CRC	1	0.7	0	0.0	+0.7	0	0.0	+0.7
<pre>B. # w/FOB test in   past 2 years # w/ rectal exam in</pre>	12	1.1	22	2.2	-1.0	68	7.3	-6.1
past 2 yrs or refusal past year	27	2.6	28	2.8	-0.2	36	3.8	-1.3
Female Active Clinic 51-80	al 1,489		1,423			1,328		
# w/ CRC screening	287	19.3	360	25.3	-6.0	385	29.0	-9.7
A. # Refusals w/ % o Total CRC	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/FOB test in past 2 years # w/ rectal exam in	78	5.2	217	15.2	-10.0	302	22.7	-17.5
past 2 yrs or refusal past year	546	36.7	467	32.8	+3.9	486	36.6	+0.1

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Colorectal Cancer Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
Total User Population 51-80	a 3,215		3,079			2,817		
# w/ CRC screening	465	14.5	507	16.5	-2.0	513	18.2	-3.7
A. # Refusals w/ % or Total CRC	1	0.0	0	0.0	+0.0	0	0.0	+0.0
<pre>B. # w/FOB test in   past 2 years # w/ rectal exam in</pre>	90	2.8	240	7.8	-5.0	371	13.2	-10.4
past 2 years or refusal past year	577	17.9	498	16.2	+1.8	525	18.6	-0.7
Total Male User Pop								
51-80	1,384		1,329			1,221		
# w/ CRC screening A. # Refusals w/ % or	163	11.8	131	9.9	+1.9	122	10.0	+1.8
Total CRC  B. # w/FOB test in	1	0.1	0	0.0	+0.1	0	0.0	+0.1
<pre>past 2 years # w/ rectal exam in</pre>	12	0.9	22	1.7	-0.8	68	5.6	-4.7
past 2 years or refusal past year	28	2.0	28	2.1	-0.1	36	2.9	-0.9
Total Female User Pop 51-80	1,831		1,750			1,596		
# w/ CRC screening	302	16.5	376	21.5	-5.0	391	24.5	-8.0
<pre>A. # Refusals w/ % of   Total CRC B. # w/FOB test in   past 2 years # w/ rectal exam in   past 2 yrs or</pre>	0	0.0	0	0.0	+0.0	0	0.0	+0.0
	78	4.3	218	12.5	-8.2	303	19.0	-14.7
refusal past year	549	30.0	470	26.9	+3.1	489	30.6	-0.7

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Tobacco Use and Exposure Assessment

#### Denominator(s):

Active Clinical patients ages 5 and older. All User Population patients ages 5 and older. Pregnant female patients.

#### Numerator(s):

Patients who have been screened for tobacco use during the Report period. Patients identified as current tobacco users during the Report Period, both smokers and smokeless users.

A: Patients identified as current smokers during the Report Period. B: Patients identified as current smokeless tobacco users during the Report Period.

Patients identified as exposed to environmental tobacco smoke (ETS) (second hand smoke) during the Report Period.

Ages are calculated at beginning of Report period. Pregnancy defined as at least two visits with POV or Problem diagnosis (V22.0-V23.9, 640.\*-648.\*, 651.\*-676.\*) during the past 20 months, with one diagnosis occurring during the reporting period and with no documented miscarriage or abortion occurring after the second pregnancy POV and during the past 20 months. An additional 8 months is included for patients who were pregnant during the Report period but who had their tobacco assessment prior to that. Miscarriage definition: (1) POV: 630, 631, 632, 633\*, 634\*, (2) CPT 59812, 59820, 59821, 59830. Abortion definition: (1) POV: 635\*, 636\* 637\*, (2) CPT: 59840, 59841, 59850, 59851, 59852, 59855, 59856, 59857. Tobacco screening is defined as at least one of the following (time frame for pregnant female patients is the past 20 months): 1. Any health factor for category Tobacco documented during Report period; 2. Tobacco-related diagnoses (POV or current Active Problem List) 305.1, V15.82; 3. Dental code 1320; 4. Any patient education code containing "TO-", "-TO" or "-SHS" . Tobacco users defined as (time frame for pregnant female patients is the past 20 months): 1. Health Factors: Current Smoker, Current Smokeless, Current Smoker and Smokeless; 2. Diagnosis codes 305.1 or V15.82; 3. Dental code 1320. Smokers defined as (time frame for pregnant female patients is the past 20 months): 1. Health Factors: Current Smoker or Current Smoker and Smokeless; 2. Diagnosis codes 305.1 or V15.82; 3. Dental code 1320. Smokeless defined as (time frame for pregnant female patients is the past 20 months): Health Factors: Current Smokeless or Current Smoker and Smokeless. ETS defined as (time frame for pregnant female patients is the past 20 months): Health Factor Smoker in Home or Exposure to Environmental Tobacco Smoke.

During FY 2006, rates of screening for tobacco use will be maintained at FY 2005 rates.

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Screening: IHS Performance: FY 2004 - 27.0%

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	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %			CHG from BASE %
# Active Clinical Pt	S							
=> 5	14,102		13,643			13,695		
# w/Tobacco								
Screening	203	1.4	229	1.7	-0.2	165	1.2	+0.2
# Tobacco Users w/ %	of							
Total Screened	99	48.8	73	31.9	+16.9	91	55.2	-6.4
A. # Smokers w/ % of								
Total Tobacco Users		99.0	72	98.6	+0.4	91	100.0	-1.0
B. # Smokeless Tobac	CO							
Users w/ % of Total Tobacco Users	1	1.0	1	1.4	-0.4	0	0.0	+1.0
# exposed to ETS/	1	1.0	Τ.	1.1	-0.4	U	0.0	+1.0
smoker in home w/ %	of							
Total Screened	1	0.5	0	0.0	+0.5	0	0.0	+0.5
10001 201001100	_	0.0	· ·	0.0		· ·	0.0	
# Male Active Clinic	al							
ages => 5	6,008		5,765			5,774		
# w/Tobacco								
Screening	102	1.7	115	2.0	-0.3	90	1.6	+0.1
# Tobacco Users w/ %				00.1				
Total Screened	61	59.8	45	39.1	+20.7	59	65.6	-5.8
A. # Smokers w/ % of	60	00 4	4 -	100 0	1 6	Γ0	100 0	1 6
Total Tobacco Users B. # Smokeless Tobac		98.4	45	100.0	-1.6	59	100.0	-1.6
Users w/ % of Total	CO							
Tobacco Users	1	1.6	0	0.0	+1.6	0	0.0	+1.6
# exposed to ETS/	_	1.0	O	0.0	11.0	O	0.0	11.0
smoker in home w/ %	of							
Total Screened	1	1.0	0	0.0	+1.0	0	0.0	+1.0
# Female Active Clin	ical							
ages => 5	8,094		7,878			7,921		
# w/Tobacco								
Screening	101	1.2	114	1.4	-0.2	75	0.9	+0.3
# Tobacco Users w/ %		25 6	0.0	0.4.6	10.1	2.0	40 5	<b>.</b> .
Total Screened	38	37.6	28	24.6	+13.1	32	42.7	-5.0
A. # Smokers w/ % of	2.0	100 0	27	06.4	.2 6	2.0	100 0	. 0 0
Total Tobacco Users B. # Smokeless Tobac		100.0	27	96.4	+3.6	34	100.0	+0.0
Users w/ % of Total								
Tobacco Users	0	0.0	1	3.6	-3.6	0	0.0	+0.0
# exposed to ETS/	U	0.0		5.0	3.0	U	3.0	10.0
smoker in home w/ %	of							
Total Screened	0	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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	REPORT PERIOD		PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Pregnant Female								
Patients	534		503			578		
# w/Tobacco								
Screening	9	1.7	4	0.8	+0.9	6	1.0	+0.6
# Tobacco Users w/ %			_			_		
Total Screened	6	66.7	3	75.0	-8.3	5	83.3	-16.7
A. # Smokers w/ % of		100 0	2	100 0	. 0 . 0	_	100 0	. 0 . 0
Total Tobacco Users		100.0	3	100.0	+0.0	5	100.0	+0.0
B. # Smokeless Tobac Users w/ % of Total	CO							
Tobacco Users	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# exposed to ETS/	U	0.0	O	0.0	+0.0	U	0.0	+0.0
smoker in home w/ %	of							
Total Screened	0	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004

Baseline Period: Jan 01, 2000 to Dec 31, 2000

	REPORT PERIOD	%	PREV YR PERIOD		CHG from PREV YR %			CHG from BASE %
# User Population ages =>5	21,185		21,061			20,746		
<pre># w/Tobacco Screening # Tobacco Users w/ %</pre>	211	1.0	235	1.1	-0.1	179	0.9	+0.1
Total Screened	107	50.7	79	33.6	+17.1	104	58.1	-7.4
A. # Smokers w/ % of Total Tobacco Users B. # Smokeless Tobac	106 co	99.1	78	98.7	+0.3	104	100.0	-0.9
Users w/ % of Total Tobacco Users # exposed to ETS/	1	0.9	1	1.3	-0.3	0	0.0	+0.9
<pre>smoker in home w/ % Total Screened</pre>	01	0.5	0	0.0	+0.5	0	0.0	+0.5
<pre># Male User Pop patients =&gt; 5</pre>	9,966		9,901			9,769		
<pre># w/Tobacco Screening # Tobacco Users w/ %</pre>	107	1.1	120	1.2	-0.1	102	1.0	+0.0
Total Screened	66	61.7	50	41.7	+20.0	70	68.6	-6.9
A. # Smokers w/ % of Total Tobacco Users B. # Smokeless Tobac	65 co	98.5	50	100.0	-1.5	70	100.0	-1.5
Users w/ % of Total Tobacco Users # exposed to ETS/	1	1.5	0	0.0	+1.5	0	0.0	+1.5
<pre>smoker in home w/ % Total Screened</pre>	of 1	0.9	0	0.0	+0.9	0	0.0	+0.9
<pre># Female User Pop patients =&gt; 5</pre>	11,219		11,160			10,977		
<pre># w/Tobacco Screening # Tobacco Users w/ %</pre>	104	0.9	115	1.0	-0.1	77	0.7	+0.2
Total Screened	41	39.4	29	25.2	+14.2	34	44.2	-4.7
<ul><li>A. # Smokers w/ % of Total Tobacco Users</li><li>B. # Smokeless Tobac Users w/ % of Total</li></ul>		100.0	28	96.6	+3.4	34	100.0	+0.0
Tobacco Users # exposed to ETS/	0	0.0	1	3.4	-3.4	0	0.0	+0.0
<pre>smoker in home w/ % Total Screened</pre>	of 0	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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	TOTAL	ACTIVE	CLINIC Age	LATION bution			
	5-13	14-17	_			65 and	older
# Tobacco Screening	3,060	2	20	67		35	
% w/Tobacco Screening	0.0	0.1	1.1	1.6	3.0	2.9	
# Tobacco Users % Tobacco Users w/ % or		2	18	46	25	7	
Total Screened	100.0	100.0	90.0	68.7	32.1	20.0	
<pre># Smokers % Smokers w/ % of</pre>	1	2	17	46	25	7	
Total Tobacco Users	100.0	100.0	94.4	100.0	100.0	100.0	
# Smokeless w/ % of	0	0	1	0	0	0	
Total Tobacco Users	0.0	0.0	5.6	0.0	0.0	0.0	
# ETS/Smk Home % ETS/Smk Home w/ % of	0	0	0	1	0	0	
Total Screened	0.0	0.0	0.0	1.5	0.0	0.0	
PREVIOUS YEAR PERIOD							
# Active Clinical					2,479		
<pre># Tobacco Screening % w/Tobacco Screening</pre>	_ ∠	2			105 4.2	54 4 7	
% W/ TODACCO Screening	0.1	0.2	0.0	1.3	7.2	<b>I.</b> /	
# Tobacco Users % Tobacco Users w/ % or		2	14	24	25	6	
Total Screened	100.0	100.0	100.0	46.2	23.8	11.1	
# Smokers % Smokers w/ % of	2	2	14	24	24	6	
Total Tobacco Users	100.0	100.0	100.0	100.0	96.0	100.0	
# Smokeless w/ % of	0	0	0	0	1	0	
Total Tobacco Users	0.0	0.0	0.0	0.0	4.0	0.0	
# ETS/Smk Home % ETS/Smk Home w/ % of	0	0	0	0	0	0	
Total Screened		0.0	0.0	0.0	0.0	0.0	

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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		ACTIVE	Age	Distri	bution	65 and	older
CHANGE FROM PREV YR % Tobacco Screening Tobacco Users Smokers Smokeless ETS	+0.0 +0.0 +0.0	-0.0 +0.0 +0.0 +0.0 +0.0	-10.0 -5.6 +5.6	+22.5 +0.0 +0.0	-1.3 +8.2 +4.0 -4.0 +0.0	-1.8 +8.9 +0.0 +0.0	
BASELINE REPORT PERIOD # Active Clinical # Tobacco Screening % w/Tobacco Screening	1	5	19	45	65	30	
# Tobacco Users % Tobacco Users w/ % of Total Screened	E	5	19 100.0		28 43.1		
# Smokers % Smokers w/ % of Total Tobacco Users	1		19 100.0		28	8	
# Smokeless % Smokeless w/ % of Total Tobacco Users	0.0	0.0	0.0	0.0	0.0	0.0	
<pre># ETS/Smk Home w/ % of Total Screened % ETS/Smk Home</pre>	0.0	0.0	0.0			0.0	
CHANGE FROM BASE YR % Tobacco Screening Tobacco Users Smokers Smokeless ETS	+0.0 +0.0 +0.0	-0.3 +0.0 +0.0 +0.0 +0.0	-10.0 -5.6 +5.6	+2.0 +0.0 +0.0	+0.2 -11.0 +0.0 +0.0 +0.0	-6.7	

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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			CLINICA Age 18-24	Distri	bution	65 and	older
CURRENT REPORT PERIOD					10 01	00 0110	010.01
MALE Active Clinical					1,052		
<pre># Tobacco Screening % w/Tobacco Screening</pre>	1 0 1	2			44 4.2		
• w/ lobacco berceiling	0.1	0.5	1.1	2.1	1,2	2.5	
<pre># Tobacco Users % Tobacco Users w/ % or</pre>	1 £	2	10	23	20	5	
	100.0	100.0	100.0	69.7	45.5	41.7	
# Smokers % Smokers w/ % of	1	2	9	23	20	5	
Total Tobacco Users	100.0	100.0	90.0	100.0	100.0	100.0	
<pre># Smokeless % Smokeless w/ % of</pre>	0	0	1	0	0	0	
Total Tobacco Users	0.0	0.0	10.0	0.0	0.0	0.0	
# ETS/Smk Home	0	0	0	1	0	0	
% ETS/Smk Home w/ % of Total Screened	0.0	0.0	0.0	3.0	0.0	0.0	
PREVIOUS YEAR PERIOD							
MALE Active Clinical # Tobacco Screening	1,505						
% w/Tobacco Screening				_	56 5.6		
• w/ lobacco berceiling	0.0	0.2	0.0	1.0	3.0	3.7	
<pre># Tobacco Users % Tobacco Users w/ % or</pre>	0 E	1	4	15	19	6	
Total Screened	0.0	100.0	100.0	53.6	33.9	23.1	
# Smokers % Smokers w/ % of	0	1	4	15	19	6	
Total Tobacco Users	0.0	100.0	100.0	100.0	100.0	100.0	
# Smokeless w/ % of	0	0	0	0	0	0	
Total Tobacco Users	0.0	0.0	0.0	0.0	0.0	0.0	
# ETS/Smk Home	0	0	0	0	0	0	
% ETS/Smk Home w/ % of Total Screened	0.0	0.0	0.0	0.0	0.0	0.0	

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Tobacco Use and Exposure Assessment (con't)

MALE ACTIVE CLINICAL POPULATION

Age Distribution
5-13 14-17 18-24 25-44 45-64 65 and older

CHANGE FROM PREV YR %							
Tobacco Screening	+0.1	+0.1	+0.8	+0.3	-1.4	-3.1	
	+100.0			+16.1			
Smokers	+100.0			+0.0		+0.0	
Smokeless	+0.0		+10.0	+0.0	+0.0		
ETS	+0.0	+0.0	+0.0	+3.0	+0.0	+0.0	
BASELINE REPORT PERIO	D						
MALE Active Clinical	1,675	568	629	1,538	928	436	
# Tobacco Screening	0	2	10	28	39	11	
% w/Tobacco Screening	0.0	0.4	1.6	1.8	4.2	2.5	
# Tobacco Users	0	2	10	21	22	4	
% Tobacco Users w/ %	_						
Total Screened	0.0	100.0	100.0	75.0	56.4	36.4	
# Smokers % Smokers w/ % of	0	2	10	21	22	4	
Total Tobacco Users	0.0	100.0	100.0	100.0	100.0	100.0	
# Smokeless	0	0	0	0	0	0	
% Smokeless w/ % of Total Tobacco Users	0.0	0.0	0.0	0.0	0.0	0.0	
# ETS/Smk Home w/ % o	f						
Total Screened	0	0	0	0	0	0	
% ETS/Smk Home	0.0	0.0	0.0	0.0	0.0	0.0	
CHANGE FROM BASE YR %							
Tobacco Screening	+0.1	_0 1	-0.1	+0.2	-0.0	+0.0	
	+100.0		+0.0		-11.0		
Smokers	+100.0		-10.0		+0.0		
Smokeless	+0.0		+10.0	+0.0			
ETS	+0.0	+0.0	+0.0	+3.0	+0.0	+0.0	

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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		ACTIVE	Age	Distri	bution		
	5-13	14-17	18-24	25-44	45-64	65 and	older
CURRENT REPORT PERIOD FEMALE Active Clinical # Tobacco Screening % w/Tobacco Screening	0		10	34	1,575 34 2.2		
# Tobacco Users	0	0	8	23	5	2	
% Tobacco Users w/ % of Total Screened	0.0	0.0	80.0	67.6	14.7	8.7	
<pre># Smokers % Smokers w/ % of</pre>	0	0	8	23	5	2	
Total Tobacco Users	0.0	0.0	100.0	100.0	100.0	100.0	
<pre># Smokeless % Smokeless w/ % of</pre>	0	0	0	0	0	0	
Total Tobacco Users	0.0	0.0	0.0	0.0	0.0	0.0	
<pre># ETS/Smk Home % ETS/Smk Home w/ % of</pre>	0	0	0	0	0	0	
Total Screened	0.0	0.0	0.0	0.0	0.0	0.0	
PREVIOUS YEAR PERIOD FEMALE Active Clinical # Tobacco Screening % w/Tobacco Screening	2		1,024 10 1.0	2,487 24 1.0	1,476 49 3.3	28	
# Tobacco Users % Tobacco Users w/ % of	2	1	10	9	6	0	
Total Screened		100.0	100.0	37.5	12.2	0.0	
# Smokers % Smokers w/ % of	2	1	10	9	5	0	
Total Tobacco Users	100.0	100.0	100.0	100.0	83.3	0.0	
<pre># Smokeless % Smokeless w/ % of</pre>	0	0	0	0	1	0	
Total Tobacco Users	0.0	0.0	0.0	0.0	16.7	0.0	
# ETS/Smk Home % ETS/Smk Home w/ % of	0	0	0	0	0	0	
Total Screened	0.0	0.0	0.0	0.0	0.0	0.0	

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Tobacco Use and Exposure Assessment (con't)

FEMALE ACTIVE CLINICAL POPULATION

Age Distribution
5-13 14-17 18-24 25-44 45-64 65 and older

CHANGE FROM PREV YR %		0 1	0 0	0 1	1 0	0 0
Tobacco Screening	-0.1	-0.1	-0.0	+0.4	-1.2	-0.9
Tobacco Users	-100.0	-100.0	-20.0	+30.1	+2.5	+8.7
		-100.0				
Smokeless		+0.0				
ETS	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0
BASELINE REPORT PERIO	D					
FEMALE Active Clinica	1 1,684	658	1,021	2,528	1,392	638
# Tobacco Screening	1	3	9	17	26	19
% w/Tobacco Screening	0.1	0.5	0.9	0.7	1.9	3.0
3						
# Tobacco Users	1	3	9	9	6	4
% Tobacco Users w/ %	of					
Total Screened	100.0	100.0	100.0	52.9	23.1	21.1
# Smokers	1	3	9	9	6	4
% Smokers w/ % of						
Total Tobacco Users		100.0	100.0	100.0	100.0	100.0
# Smokeless	0	0	0	0	0	0
% Smokeless w/ % of						
Total Tobacco Users	0.0	0.0	0.0	0.0	0.0	0.0
# ETS/Smk Home w/ % o	f					
Total Screened	0	0	0	0	0	0
% ETS/Smk Home		0.0		-	_	0.0
o Elby Simi Home	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE FROM BASE YR %						
Tobacco Screening	-0.1	-0.5	+0.1	+0.7	+0.3	+0.2
Tobacco Users	-100.0	-100.0	-20.0	+14.7	-8.4	-12.4
Smokers	-100.0	-100.0	+0 0	+0 0	+0 0	+0.0
Smokeless		+0.0			+0 0	+0 0
ETS	±0.0	+0.0	±0 0	±0 0	+0.0	+0.0
FID	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

#### Tobacco Cessation

#### Denominator(s):

GPRA Denominator: Active Clinical patients identified as current tobacco users prior to the Report Period.

User Population patients identified as current tobacco users prior to the Report Period.

#### Numerator(s):

GPRA Numerator: Patients who have received tobacco cessation counseling during the Report Period, including documented refusal in past year. Patients identified during the Report Period as quit tobacco use.

Age is calculated at the beginning of the Report period. Tobacco users defined as documented prior to the Report Period: 1. Health Factors (looks at the last documented health factor): Current Smoker, Current Smokeless, Current Smoker and Smokeless, Cessation-Smoker, Cessation-Smokeless, Cessation-Smoker and Smokeless; 2. Tobacco-related POV or active Problem List diagnoses 305.1, 305.10-305.12 (old codes), or V15.82; 3. Dental code 1320.

Tobacco cessation counseling defined as documented during Report Period:
1. Patient education codes containing "TO-", "-TO", or "-SHS"; 2. Clinic code 94 (tobacco cessation clinic); 3. Dental code 1320. Refusals defined as documented refusal of patient education codes containing "TO-", "-TO", or "-SHS" during Report Period.

Quit tobacco use defined as documented during Report Period: 1. POV or current Active Problem List diagnosis code 305.13 Tobacco use in remission; or 2. Health Factors documented during the Report Period (looks at the last document health factor): Previous Smoker, Previous Smokeless.

During FY 2006, establish the proportion of tobacco using patients that receive tobacco cessation intervention.

HP 2010 Target: 75%

REPORT % PREV YR % CHG from BASE % CHG from PERIOD PERIOD PREV YR % PERIOD BASE %

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004

Baseline Period: Jan 01, 2000 to Dec 31, 2000

	REPORT PERIOD	%	PREV YR PERIOD		CHG from : PREV YR % :	BASE PERIOD		CHG from BASE %
Active Clinical Tobac Users (GPRA)	cco 358		318			228		
<pre># w/tobacco cessation counseling or refusal (GPRA) # who quit</pre>	n 5 1	1.4	0	0.0	+1.4 +0.3	0	0.0	+1.4
Male Active Clinical Tobacco Users	232	0.3	209	0.0		145		
<pre># w/tobacco cessation counseling or refusal (GPRA) # who quit</pre>	2 0	0.9	0	0.0	+0.9	0	0.0	+0.9
Female Active Clinica Tobacco Users	al 126		109			83		
<pre># w/tobacco cessation counseling or refusal (GPRA) # who quit</pre>	3 1	2.4	0	0.0	+2.4+0.8	0	0.0	+2.4+0.8
User Pop Tobacco Users	430		388			263		
<pre># w/tobacco cessation counseling or refusal # who quit</pre>	5 1	1.2	0	0.0	+1.2 +0.2	0	0.0	+1.2 +0.2

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Male User Pop Tobacco Users	290		264			172		
<pre># w/tobacco cessatio counseling or</pre>	n							
refusal	2	0.7	0	0.0	+0.7	0	0.0	+0.7
# who quit	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Female User Pop								
Tobacco Users	140		124			91		
<pre># w/tobacco cessatio counseling or</pre>	n							
refusal	3	2.1	0	0.0	+2.1	0	0.0	+2.1
# who quit	1	0.7	0	0.0	+0.7	0	0.0	+0.7

### \*\*\* IHS 2006 Clinical Performance Report \*\*\*

DEMO HOSPITAL

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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	ACTIVE CLIN	BACCO USERS Distribution		
	<	:12	12-17	=>18
CURRENT REPORT PERIOD Active Clin Tobacco Users	5	1	7	350
<pre># w/tobacco cessation   counseling or refusal % w/ tobacco cessation</pre>		0	0	5
counseling or refusal	C	.0	0.0	1.4
# who quit % who quit	C	0	0.0	10.3
PREVIOUS YEAR PERIOD Active Clin Tobacco Users	5	0	11	307
<pre># w/tobacco cessation   counseling or refusal % w/tobacco cessation</pre>		0	0	0
counseling or refusal	C	.0	0.0	0.0
# who quit % who quit	C	0	0.0	0.0
CHANGE FROM PREV YR % w/tobacco cessation				
counseling or refusal who quit		0.0	+0.0 +0.0	+1.4+0.3
BASELINE REPORT PERIOD Active Clin Tobacco Users	5	0	11	217
<pre># w/tobacco cessation   counseling or refusal</pre>		0	0	0
<pre>% w/tobacco cessation   counseling or refusal</pre>	C	0.0	0.0	0.0
# who quit % who quit	C	0.0	0 0 0	0.0
CHANGE FROM BASE YR %				
<pre>w/tobacco cessation   counselingor refusal who quit</pre>		0.0	+0.0 +0.0	+1.4

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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	MALE	ACTIVE	CLINI	TOBACCO Distrib 12-17	ution	=>18
CURRENT REPORT PERIOD Male AC Tobacco Users			0	2		230
<pre># w/tobacco cessation   counseling or refusal % w/ tobacco cessation</pre>	-		0	0		2
counseling or refusal	-		0.0	0.0		0.9
# who quit % who quit			0.0	0.0		0.0
PREVIOUS YEAR PERIOD Male AC Tobacco Users			0	4		205
<pre># w/tobacco cessation   counseling or refusal % w/tobacco cessation</pre>			0	0		0
counseling or refusal			0.0	0.0		0.0
# who quit % who quit			0.0	0.0		0.0
CHANGE FROM PREV YR % w/tobacco cessation						
counseling or refusal who quit	•		-0.0 -0.0	+0.0		+0.9
BASELINE REPORT PERIOD Male AC Tobacco Users			0	8		137
# w/tobacco cessation counseling or refusal			0	0		0
<pre>% w/tobacco cessation   counseling or refusal</pre>			0.0	0.0		0.0
# who quit % who quit			0.0	0.0		0.0
CHANGE FROM BASE YR % w/tobacco cessation						
counselingor refusal who quit			-0.0 -0.0	+0.0 +0.0		+0.9

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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	FEMALE	ACTIVE CLI	INICAL TOBACCO Age Distribut 12-17	
CURRENT REPORT PERIOD Female AC Tobacco User	ſS	1	5	120
<pre># w/tobacco cessation   counseling or refusa % w/ tobacco cessation</pre>		0	0	3
counseling or refusa	al	0.0	0.0	2.5
# who quit % who quit		0.0	0 . 0	10.8
PREVIOUS YEAR PERIOD Female AC Tobacco User	cs	0	7	102
<pre># w/tobacco cessation   counseling or refusa % w/tobacco cessation</pre>	al	0	0	0
counseling or refusa	al	0.0	0.0	0.0
# who quit % who quit		0.0	0	0.0
CHANGE FROM PREV YR % w/tobacco cessation				
counseling or refusa who quit	al	+0.0	+0.0 +0.0	+2.5 +0.8
BASELINE REPORT PERIOR Female AC Tobacco User		0	3	80
# w/tobacco cessation				
counseling or refusa % w/tobacco cessation	al	0	0	0
counseling or refusa	al	0.0	0.0	0.0
# who quit % who quit		0	0	0.0
CHANGE FROM BASE YR %				
<pre>w/tobacco cessation   counselingor refusa who quit</pre>	L	+0.0 +0.0	+0.0 +0.0	+2.5

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Alcohol Screening (FAS Prevention)

#### Denominator(s):

GPRA Denominator: Female Active Clinical patients ages 15 to 44. Female User Population patients ages 15 to 44.

#### Numerator(s):

GPRA Numerator: Patients screened for alcohol use during the Report Period, including refusals in the past year.

- A: Patients with exam code, Alcohol health factor or screening diagnosis during the Report Period.
- B: Patients with alcohol-related diagnoses during the Report Period.
- C: Patients with alcohol-related patient education or counseling during the Report Period.
- D: Patients with documented refusal in past year.

Ages are calculated at beginning of Report period. Screening is defined as at least one of the following: A1) PCC Exam code 35, A2) Any Alcohol Health Factor, A3) Screening diagnosis V11.3 (history of alcoholism), V79.1 or BHS problem code 29.1 (screening for alcoholism); B) Diagnosis (POV, current PCC or BHS Problem List): 303.\*, 305.0\*, 291.\*, 357.5\*; BHS POV 10, 27, 29; C) Patient education codes containing "AOD-" or "-AOD" or old codes containing "CD-" or "-CD"; or D) Refusal of PCC Exam code 35 in the past year.

During FY 2006, increase the screening rate for alcohol use in female patients ages 15 to 44.

IHS Performance: FY 2004 - 7.0%; IHS FY 2010 Target: 25.0%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	00	CHG from BASE %
Female Active Clinica ages 15-44	al							
(GPRA)	4,067		3,999			4,036		
# w/any alcohol screening								
(GPRA)	106	2.6	96	2.4	+0.2	116	2.9	-0.3
A. # w/exam/alcohol H	HF/							
screen DX	8	0.2	8	0.2	-0.0	14	0.3	-0.2
B. # w/alcohol relate	ed							
diagnosis	98	2.4	94	2.4	+0.1	109	2.7	-0.3
C. # w/alcohol relate	ed							
patient education	3	0.1	0	0.0	+0.1	0	0.0	+0.1
D. # w/refusal in								
past year	1	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Alcohol Screening (FAS Prevention) (con't)

	EPORT ERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	0/0	CHG from BASE %
Female User Population ages 15-44	5,785		5,797			5,727		
<pre># w/any alcohol   screening A. # w/exam/alcohol HF   screen DX</pre>	119 /	2.1	119	2.1	+0.0	141	2.5	-0.4
screening	8	0.1	9	0.2	-0.0	14	0.2	-0.1
B. # w/alcohol related		1 0	116	0 0	0 1	124	0 0	0 4
<pre>diagnosis C. # w/alcohol related</pre>	111	1.9	116	2.0	-0.1	134	2.3	-0.4
patient education	3	0.1	0	0.0	+0.1	0	0.0	+0.1
D. # w/refusal in	1	0 0	0	0 0	+0 0	0	0 0	+0 0
past year	1	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Intimate Partner (Domestic) Violence Screening

#### Denominator(s):

Female Active Clinical patients ages 13 and older.

GPRA Denominator: Female Active Clinical patients ages 15-40.

Female User Population patients ages 13 and older.

#### Numerator(s):

GPRA Numerator: Patients screened for intimate partner (domestic) violence at any time during the Report Period, including documented refusals in past year.

- A: Patients with documented IPV/DV exam.
- B: Patients with IPV/DV related diagnoses.
- C: Patients provided with education or counseling about IPV/DV
- D: Patients with documented refusal in past year of an IPV/DV exam or IPV/DV-related education.

Age is calculated at beginning of the Report Period. Screening is defined as at least one of the following: A) PCC Exam code 34 or BHS IPV/DV exam; B) Diagnosis (POV or current PCC or BHS Problem List): 995.80-83, 995.85 (adult maltreatment), V15.41, V15.42, V15.49 (history of abuse); BHS POV 43.\*, 44.\* C1) Patient education codes containing "DV-" or "-DV"; C2) IPV/DV counseling: V61.11. Refusals defined as: A) Any PCC refusal in past year with Exam Code 34, BHS refusal in past year of IPV/DV exam; B) Any refusal in past year with Patient Education codes containing "DV-" or "-DV".

During FY 2006, increase the screening rate for domestic violence in female patients ages 15 through 40.

IHS Performance: FY 2004 - 4.0%; IHS FY 2010 Target: 25.0%

NOTE: Age range changed from 16-24 to 15-40 in 2005.

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# Female Active Clinical ages 13 and older	6,754		6,542			6,408		
# w/IPV/DV screening	ī							
or refusal	139	2.1	103	1.6	+0.5	132	2.1	-0.0
A. # w/documented								
IPV/DV exam	1	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ IPV/DV relat	.ed							
diagnosis	132	2.0	99	1.5	+0.4	131	2.0	-0.1
C. # provided DV								
education	3	0.0	4	0.1	-0.0	2	0.0	+0.0
D. # w/ documented								
refusal	3	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Intimate Partner (Domestic) Violence Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		0/0	CHG from BASE %
# Female Active Clir ages 15-40	nical							
(GPRA)	3,581		3,499			3,557		
<pre># w/IPV/DV screening or refusal (GPRA) A. # w/ documented</pre>	107	3.0	73	2.1	+0.9	97	2.7	+0.3
IPV/DV exam  B. # w/ IPV/DV relat	1	0.0	0	0.0	+0.0	0	0.0	+0.0
diagnosis C. # provided DV	100	2.8	70	2.0	+0.8	97	2.7	+0.1
education  D. # w/ documented	3	0.1	3	0.1	-0.0	1	0.0	+0.1
refusal	3	0.1	0	0.0	+0.1	0	0.0	+0.1
# Female User Pop 13 and older	9,215		9,063			8,734		
<pre># w/IPV/DV screening or refusal A. # w/ documented</pre>	146	1.6	111	1.2	+0.4	138	1.6	+0.0
IPV/DV exam  B. # w/ IPV/DV relat diagnosis C. # provided DV	_ 1	0.0	0	0.0	+0.0	0	0.0	+0.0
	139	1.5	107	1.2	+0.3	136	1.6	-0.0
education	3	0.0	4	0.0	-0.0	3	0.0	-0.0
D. # w/ documented refusal	3	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

#### Depression Screening

#### Denominator(s):

GPRA Denominator: Active Clinical patients ages 18 and older. Broken down by gender.

A. Active Clinical patients ages 65 and older. Broken down by gender. User Population patients ages 18 and older. Broken down by gender. A. User Population patients ages 65 and older. Broken down by gender. Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes prior to the Report period, AND at least 2 visits during the Report period, AND 2 DM-related visits ever. Broken down by gender

All patients diagnosed with ischemic heart disease prior to the Report period and with at least two IHD-related visits during the Report period.

#### Numerator(s):

GPRA Numerator: Patients screened for depression or diagnosed with a mood disorder at any time during the Report period, including documented refusals in past year.

- A: Patients screened for depression during the Report period.
- B: Patients with a diagnosis of a mood disorder during the Report period.
- C: Patients with documented refusal in past year.

Age is calculated at beginning of the Report period. Diabetes diagnosis defined as POV 250.00-250.93. Ischemic heart disease diagnosis defined as: POV 410.0-412.\*, 414.0-414.9, 428.\*, 429.2.

Screening is defined as: Exam Code 36, POV V79.0, or BHS problem code 14.1 (screening for depression).

Mood disorders are defined as at least two visits in PCC or BHS during the Report period with POV for: Major Depressive Disorder, Dysthymic Disorder, Depressive Disorder NOS, Bipolar I or II Disorder, Cyclothymic Disorder, Bipolar Disorder NOS, Mood Disorder Due to a General Medical Condition, Substance-induced Mood Disorder, or Mood Disorder NOS. These POV codes are: 296.\*, 291.89, 292.84, 293.83, 300.4, 301.13, or 311 or BHS POV 14 or 15.

Refusals defined as: A) Any PCC refusal in past year with Exam Code 36.

During FY 2006, establish a baseline rate of annual screening for depression in adults ages 18 and over.

IHS FY 2010 Target: 20.0%

REPORT % PREV YR % CHG from BASE % CHG from PERIOD PERIOD PREV YR % PERIOD BASE %

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts => 18 (GPRA)	9,667		9,329			9,110		
# w/ Depression scre	ening,							
(GPRA) A. # screened for	355	3.7	346	3.7	-0.0	288	3.2	+0.5
depression	7	0.1	0	0.0	+0.1	0	0.0	+0.1
B. # w/mood disorder DX	347	3.6	346	3.7	-0.1	288	3.2	+0.4
<pre>C. # w/refusal in past year</pre>	1	0.0	0	0.0	+0.0	0	0.0	+0.0
Male Active Clinical Pts =>18	3,822		3,647			3,531		
# w/ Depression scre DX or refusal	ening, 89	2.3	74	2.0	+0.3	64	1.8	+0.5
A. # screened for depression	1	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Mood Disorder DX	87	2.3	74	2.0	+0.2	64	1.8	+0.5
<pre>C. # w/refusal in  past year</pre>	1	0.0	0	0.0	+0.0	0	0.0	+0.0
	7							
Female Active Clinic Pts =>18	5,845		5,682			5,579		
# w/ Depression scre	ening,							
DX or refusal A. # screened for	266	4.6	272	4.8	-0.2	224	4.0	+0.5
depression	6	0.1	0	0.0	+0.1	0	0.0	+0.1
B. # w/Mood Disorder DX	260	4.4	272	4.8	-0.3	224	4.0	+0.4
<pre>C. # w/refusal in   past year</pre>	0	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts => 65	1,203		1,154			1,074		
# w/ Depression scre DX or refusal A. # screened for	ening, 42	3.5	45	3.9	-0.4	35	3.3	+0.2
depression	1	0.1	0	0.0	+0.1	0	0.0	+0.1
<ul><li>B. # w/mood disorder</li><li>DX</li><li>C. # w/refusal in</li></ul>	41	3.4	45	3.9	-0.5	35	3.3	+0.1
past year	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Male Active Clinical Pts =>65	475		459			436		
# w/ Depression scre	ening, 6	1.3	6	1.3	-0.0	5	1.1	+0.1
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Mood Disorder DX	6	1.3	6	1.3	-0.0	5	1.1	+0.1
<pre>C. # w/refusal in   past year</pre>	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Female Active Clinic Pts =>65	al 728		695			638		
<pre># w/ Depression scre DX or refusal A. # screened for depression</pre>	eening, 36	4.9	39	5.6	-0.7	30	4.7	+0.2
	1	0.1	0	0.0	+0.1	0	0.0	+0.1
B. # w/Mood Disorder DX	35	4.8	39	5.6	-0.8	30	4.7	+0.1
<pre>C. # w/refusal in   past year</pre>	0	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
User Population Pts => 18	14,395		14,166			13,626		
# w/ Depression scre DX or refusal A. # screened for	eening, 371	2.6	369	2.6	-0.0	306	2.2	+0.3
depression  B. # w/mood disorder	7	0.0	0	0.0	+0.0	0	0.0	+0.0
DX	363	2.5	369	2.6	-0.1	306	2.2	+0.3
<pre>C. # w/refusal in   past year</pre>	1	0.0	0	0.0	+0.0	0	0.0	+0.0
Male User Population	ı							
Pts =>18	6,535		6,445			6,189		
# w/ Depression scre	ening, 98	1.5	85	1.3	+0.2	76	1.2	+0.3
A. # screened for depression	1	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Mood Disorder DX	96	1.5	85	1.3	+0.2	76	1.2	+0.2
<pre>C. # w/refusal in past year</pre>	1	0.0	0	0.0	+0.0	0	0.0	+0.0
Female User Populati Pts =>18	on 7,860		7,721			7,437		
<pre># w/ Depression scre DX or refusal A. # screened for depression</pre>	eening, 273	3.5	284	3.7	-0.2	230	3.1	+0.4
	6	0.1	0	0.0	+0.1	0	0.0	+0.1
B. # w/Mood Disorder DX	267	3.4	284	3.7	-0.3	230	3.1	+0.3
<pre>C. # w/refusal in  past year</pre>	0	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004

Baseline Period: Jan 01, 2000 to Dec 31, 2000

	REPORT PERIOD	%	PREV YR PERIOD		CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
User Population Pts => 65	1,465		1,398			1,290		
<pre># w/ Depression scre DX or refusal A. # screened for</pre>	ening, 42	2.9	45	3.2	-0.4	35	2.7	+0.2
depression	1	0.1	0	0.0	+0.1	0	0.0	+0.1
B. # w/mood disorder DX	41	2.8	45	3.2	-0.4	35	2.7	+0.1
<pre>C. # w/refusal in   past year</pre>	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Male User Population Pts =>65	590		562			540		
# w/ Depression scree	ening, 6	1.0	6	1.1	-0.1	5	0.9	+0.1
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Mood Disorder DX	6	1.0	6	1.1	-0.1	5	0.9	+0.1
<pre>C. # w/refusal in  past year</pre>	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Female User Populati Pts =>65	on 875		836			750		
# w/ Depression scree DX or refusal A. # screened for	ening, 36	4.1	39	4.7	-0.6	30	4.0	+0.1
depression	1	0.1	0	0.0	+0.1	0	0.0	+0.1
B. # w/Mood Disorder DX	35	4.0	39	4.7	-0.7	30	4.0	+0.0
<pre>C. # w/refusal in  past year</pre>	0	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	90	CHG from BASE %
Active Diabetic Pts	1,412		1,304			1,156		
# w/ Depression scree DX or refusal A. # screened for	ening, 67	4.7	64	4.9	-0.2	51	4.4	+0.3
depression	1	0.1	0	0.0	+0.1	0	0.0	+0.1
<ul><li>B. # w/mood disorder</li><li>DX</li><li>C. # w/refusal in</li></ul>	66	4.7	64	4.9	-0.2	51	4.4	+0.3
past year	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Male Active Diabetic Pts	614		582			503		
# w/ Depression scre- DX or refusal A. # screened for	ening, 19	3.1	16	2.7	+0.3	11	2.2	+0.9
depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
<pre>B. # w/Mood Disorder   DX C. # w/refusal in</pre>	19	3.1	16	2.7	+0.3	11	2.2	+0.9
past year	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Female Active Diabet Pts	ic 798		722			653		
# w/ Depression scree DX or refusal A. # screened for	ening, 48	6.0	48	6.6	-0.6	40	6.1	-0.1
depression	1	0.1	0	0.0	+0.1	0	0.0	+0.1
<ul><li>B. # w/Mood Disorder</li><li>DX</li><li>C. # w/refusal in</li></ul>	47	5.9	48	6.6	-0.8	40	6.1	-0.2
past year	0	0.0	0	0.0	+0.0	0	0.0	+0.0

### Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004

Baseline Period: Jan 01, 2000 to Dec 31, 2000

	REPORT PERIOD	જ	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Pts w/IHD DX	212		193			130		
# w/ Depression scre DX or refusal A. # screened for	eening, 8	3.8	7	3.6	+0.1	7	5.4	-1.6
depression  B. # w/mood disorder	0	0.0	0	0.0	+0.0	0	0.0	+0.0
DX C. # w/refusal in	8	3.8	7	3.6	+0.1	7	5.4	-1.6
past year	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Male Pts w/ IHD Dx	135		123			78		
# w/ Depression scre DX or refusal A. # screened for	eening, 2	1.5	2	1.6	-0.1	2	2.6	-1.1
depression  B. # w/Mood Disorder	0	0.0	0	0.0	+0.0	0	0.0	+0.0
DX C. # w/refusal in	2	1.5	2	1.6	-0.1	2	2.6	-1.1
past year	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Female Pts w/ IHD DX	77		70			52		
# w/ Depression scre DX or refusal A. # screened for	eening, 6	7.8	5	7.1	+0.6	5	9.6	-1.8
depression  B. # w/Mood Disorder	0	0.0	0	0.0	+0.0	0	0.0	+0.0
DX	6	7.8	5	7.1	+0.6	5	9.6	-1.8
<pre>C. # w/refusal in  past year</pre>	0	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Antidepressant Medication Management

### Denominator(s):

As of the 120th day of the Report period, Active Clinical patients 18 years and older who were diagnosed with a new episode of depression and treated with antidepressant medication in the past year. As of the 120th day of the Report period, User Population patients 18 years and older who were diagnosed with a new episode of depression and treated with antidepressant medication in the past year.

#### Numerator(s):

Optimal Practitioner Contacts: Patients with at least three mental health visits with a non-mental health or mental health provider within 12 weeks (84 days) after diagnosis, two of which must be face-to-face visits and one of which must be with a prescribing provider. Effective Acute Phase Treatment: Patients who filled a sufficient number of separate prescriptions/refills of antidepressant medication for continuous treatment of at least 84 days (12 weeks). Effective Continuation Phase Treatment: Patients who filled a sufficient number of separate prescriptions/refills of antidepressant medication treatment to provide continuous treatment for at least 180 days (6 months).

Age is calculated at the beginning of the Report period. To be included in the denominator, patient must meet both of the following conditions:

1. One of the following from the 121st day of the year prior to the Report period to the 120th day of the Report period: 1) one visit in any setting with major depression DX (see list of codes below) as primary POV, 2) two outpatients visits occurring on different dates of service with secondary POV of major depression, or 3) an inpatient visit with secondary POV of major depression.

For example, if Report period is July 1, 2005 - June 30, 2006, patient must have one of the three scenarios above during 11/1/2004 - 10/29/2005.

Major depression defined as POV 296.2\*, 296.3\*, 298.0, 300.4, 309.1, 311. The Index Episode Start Date is date of the patient's earliest visit during this period. For inpatient visits, the discharge date will be used.

2. Filled a prescription for an antidepressant medication (see list of medications below) within 30 days before the Index Episode Start Date or 14 days on or after that date. In V Medication, Date Discontinued must not be equal to the prescription (i.e. visit) date. The Index Prescription Date is the date of the earliest prescription for antidepressant medication filled during that time period.

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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### Denominator Exclusions:

- 1. Patients who have had any diagnosis of depression within the previous 120 days (4 months) of the Index Episode Start Date. The POVs to be checked for prior depressive episodes is more comprehensive and include the following: POV 296.2\*-296.9\*, 298.0, 300.4, 309.0, 309.1, 309.28, 311, or
- 2. Patients who had a new or refill prescription for antidepressant medication (see list of medications below) within 90 days (3 months) prior to the Index Prescription Date are excluded as they do not represent new treatment episodes, or
- 3. Patients who had an acute mental health or substance abuse inpatient stay during the 245 days after the Index Episode Start Date treatment period. Acute mental health stays are defined as Service Category of H and primary POV 290\*, 293\*-302\*, 306\*-316\*. Substance abuse inpatient stays are defined as Service Category of H and primary POV 291\*-292\*, 303\*-305\* or primary POV 960\*-979\* AND secondary POV of 291\*-292\*, 303\*-305\*.

Optimal Practitioner Contacts numerator: Patient must have: 1) Three face-to-face follow-up outpatient, non-ER visits (clinic code not equal to 30) or intermediate treatment with either a non-mental health or mental health provider within 84 days after the Index Episode Start Date, or 2) two face-to-face outpatient, non-ER visits (clinic code not equal to 30) and one telephone visit (Service Category T) with either a non-mental health or mental health provider within 84 days after the Index Episode Start Date. For either option, one of the visits must be to a prescribing provider, defined as provider codes 00, 08, 11, 16-18, 21, 24-25, 30, 33, 41, 44-45, 47, 49, 64, 67-68, 70-83, 85-86, A1, A9, or B1-B6. NOTE: If patient was diagnosed with two secondary diagnoses of depression, the second visit may be counted toward the numerator.

Outpatient mental health provider visits are defined as BHS or PCC visit with primary provider code of 06, 12, 19, 48, 49, 50, 62, 63, 81, or 92-96, AND

- 1. A) Service category A, S, or O, and B1) CPT 90801, 90802, 90804-90819, 90821-90824, 90826-90829, 90845, 90847, 90849, 90853, 90857, 90862, 90870, 90871, 90875, 90876, 99384-99387, 99394-99397, 99401-99404 or B2) POV 290\*, 293\*-302\*, 306\*-316\*, OR
- 2. A) Service category of A, S, or O and B1) Location of Encounter = Home (as designated in Site Parameters) or B2) clinic code = 11, OR

Report Period: Jan 01, 2005 to Dec 31, 2005
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Baseline Period: Jan 01, 2000 to Dec 31, 2000

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3. Service category of T.

Outpatient non-mental health provider visits are defined as BHS or PCC visits with:

- 1. A) Service category A, S, or O, and B) CPT 90801, 90802, 90804-90819, 90821-90824, 90826-90829, 90845, 90847, 90849, 90853, 90857, 90862, 90870, 90871, 90875, 90876, OR
- 2. Al) Service category A, S, O, or T or A2) Location of Encounter = Home (as designated in Site Parameters) or A3) clinic code 11 and B) POV 290\*, 293\*-302\*, 306\*-316\*, OR
- 3. A) Service category A, S, or O, and B) CPT 99384-99387, 99394-99397, 99401-99404 and C) POV 290\*, 293\*-302\*, 306\*-316\*.

Effective Acute Phase Treatment numerator: For all antidepressant medication prescriptions filled (see list of medications below) within 114 days of the Index Prescription Date, from V Medication CRS counts the days prescribed (i.e. treatment days) from the Index Prescription Date until a total of 84 treatment days has been established. If the patient had a total gap exceeding 30 days or if the patient does not have 84 treatment days within the 114 day timeframe, the patient is not included in the numerator.

NOTE: If the medication was started and then discontinued, CRS will recalculate the # Days Prescribed by subtracting the prescription date (i.e. visit date) from the V Medication Discontinued Date. Example: Rx Date=11/15/2004, Discontinued Date=11/19/2004, Recalculated # Days Prescribed=4.

Example of Patient Included in Numerator:

- 1st RX is Index Rx Date: 11/1/2004, # Days Prescribed=30 Rx covers patient through 12/1/2004
- 2nd RX: 12/15/2004, # Days Prescribed=30
  Gap #1 = (12/15/2004-12/1/2004) = 14 days
  Rx covers patient through 1/14/2005
- 3rd RX: 1/10/2005, # Days Prescribed=30
   No gap days.

Rx covers patient through 2/13/2005

- Index Rx Date 11/1/2004 + 114 days = 2/23/2005
- Patient's 84th treatment day occurs on 2/7/2005, which is <= 2/23/2005 AND # gap days of 14 is less than 30.

Example of Patient Not Included in Numerator:

- 1st Rx is Index Rx Date: 11/1/2004, # Days Prescribed=30

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Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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- Rx covers patient through 12/1/2004
- 2nd Rx: 12/15/2004, # Days Prescribed=30
  Gap #1 = (12/15/2004-12/1/2004) = 14 days
  Rx covers patient through 1/14/2005
- 3rd Rx: 2/01/2005, # Days Prescribed=30
  Gap #2 = (2/01/2005-1/14/2005) = 18, total # gap days = 32,
  so patient is not included in the numerator

Effective Continuation Phase Treatment numerator: For all antidepressant medication prescriptions (see list of medications below) filled within 231 days of the Index Prescription Date, CRS counts the days prescribed (i.e. treatment days) (from V Medication) from the Index Prescription Date until a total of 180 treatment days has been established. If the patient had a total gap exceeding 51 days or if the patient does not have 180 treatment days within the 231 day timeframe, the patient is not included in the numerator.

NOTE: If the medication was started and then discontinued, CRS will recalculate the # Days Prescribed by subtracting the prescription date (i.e. visit date) from the V Medication Discontinued Date. Example: Rx Date=11/15/2004, Discontinued Date=11/19/2004, Recalculated # Days Prescribed=4.

Antidepressant medications defined with medication taxonomy BGP ANTIDEPRESSANT MEDS. (Medications are: Tricyclic antidepressants (TCA) and other cyclic antidepressants, Selective serotonin reuptake inhibitors (SSRI), Monoamine oxidase inhibitors (MAOI), Serotonin-norepinepherine reuptake inhibitors (SNRI), and other antidepressants.)

For FY 2006, establish the baseline rate for patients with new depression diagnosis who are receiving appropriate treatment medication.

HP 2010 Target: 50%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts = depression DX and antidepressant meds	>18 w/n	ew	149			136		
<pre># w/3 outpt mental health visits within 12 weeks</pre>	31	22.5	51	34.2	-11.8	44	32.4	-9.9
<pre># w/12 week treatment meds # w/180 day treatment</pre>	62	44.9	63	42.3	+2.6	53	39.0	+6.0
meds	44	31.9	34	22.8	+9.1	34	25.0	+6.9

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Antidepressant Medication Management (con't)

	EPORT ERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
User Pop Pts =>18 w/new depression DX and antidepressant meds	v 151		164			147		
<pre># w/3 outpt mental health visits within</pre>								
12 weeks # w/12 week treatment	35	23.2	54	32.9	-9.7	47	32.0	-8.8
meds # w/180 day treatment	65	43.0	67	40.9	+2.2	55	37.4	+5.6
meds	45	29.8	36	22.0	+7.9	34	23.1	+6.7

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

### Obesity Assessment

### Denominator(s):

Active Clinical patients ages 2 through 74. All User Population patients ages 2 through 74.

#### Numerator(s):

Patients for whom a BMI could be calculated, including refusals in the past year.

For those with a BMI calculated, patients considered overweight but not obese using BMI and standard tables.

For those with a BMI calculated, patients considered obese using BMI and standard tables.

Total of overweight and obese.

Patients with documented refusal in past year.

Age is calculated at beginning of the Report Period. CRS calculates BMI at the time the report is run, using NHANES II. For 18 and under, a height and weight must be taken on the same day any time during the Report Period. For 19 through 50, height and weight must be recorded within last 5 years, not required to be on the same day. For over 50, height and weight within last 2 years, not required to be recorded on same day. Overweight but not obese is defined as BMI of 25 through 29 for adults 19 and older. Obese is defined as BMI of 30 or more for adults 19 and older. For ages 2-18, definitions based on standard tables. Refusals include REF (refused), NMI (not medically indicated) and UAS (unable to screen) and must be documented during the past year. For ages 18 and under, both the height and weight must be refused on the same visit at any time during the past year. For ages 19 and older, the height and the weight must be refused during the past year and are not required to be on the same visit.

During FY 2006, each Area will increase the number of patients for whom BMI data can be measured by 5%.

BMI Available: IHS Performance: FY 2004 - 60.0%

REPORT % PREV YR % CHG from BASE % CHG from PERIOD PERIOD PREV YR % PERIOD BASE %

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
Active Clinical Pts ages 2-74	14,886		14,437			14,487		
# w/BMI calculated	3,054	20.5	2,625	18.2	+2.3	2,918	20.1	+0.4
A. # Overweight w/ % of Total BMI	668	21.9	643	24.5	-2.6	732	25.1	-3.2
B. # Obese w/ % of Total BMI	1,073	35.1	982	37.4	-2.3	1,041	35.7	-0.5
<pre>C. # Overweight/Obes % of Total BMI D. # w/refusal in pa</pre>	1,741	57.0	1,625	61.9	-4.9	1,773	60.8	-3.8
year w/ % of Total BMI	3	0.1	0	0.0	+0.1	0	0.0	+0.1
Male Active Clinical Pts 2-74	6,452		6,217			6,240		
# w/BMI calculated	1,373	21.3	1,127	18.1	+3.2	1,214	19.5	+1.8
A. # Overweight w/ % of Total BMI	281	20.5	276	24.5	-4.0	293	24.1	-3.7
B. # Obese w/ % of Total BMI	463	33.7	395	35.0	-1.3	413	34.0	-0.3
<pre>C. #Overweight/Obese % of Total BMI D. # w/refusal in pa</pre>	744	54.2	671	59.5	-5.4	706	58.2	-4.0
year w/ % of Total BMI	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Female Active Clinic Pts 2-74	al 8,434		8,220			8,247		
# w/BMI calculated	1,681	19.9	1,498	18.2	+1.7	1,704	20.7	-0.7
A. # Overweight w/ % of Total BMI	387	23.0	367	24.5	-1.5	439	25.8	-2.7
<pre>B. # Obese w/</pre>	610	36.3	587	39.2	-2.9	628	36.9	-0.6
	997	59.3	954	63.7	-4.4	1,067	62.6	-3.3
year w/ % of Total BMI	3	0.2	0	0.0	+0.2	0	0.0	+0.2

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
User Population Pts 2-74	22,230		22,140			21,867		
# w/BMI calculated	3,478	15.6	2,980	13.5	+2.2	3,316	15.2	+0.5
A. # Overweight w/ % of Total BMI	750	21.6	725	24.3	-2.8	818	24.7	-3.1
B. # Obese w/ % of Total BMI	1,200	34.5	1,099	36.9	-2.4	1,145	34.5	-0.0
<pre>C. #Overweight/Obese % of Total BMI D. # w/refusal in pa</pre>	1,950	56.1	1,824	61.2	-5.1	1,963	59.2	-3.1
year w/ % of Total BMI	3	0.1	0	0.0	+0.1	0	0.0	+0.1
Male User Pop 2-74 years	10,536		10,501			10,420		
	1,613	15.3	1,328	12.6	+2.7	1,440	13.8	+1.5
A. # Overweight w/ % of Total BMI	326	20.2	321	24.2	-4.0	342	23.8	-3.5
B. # Obese w/ % of Total BMI	535	33.2	462	34.8	-1.6	467	32.4	+0.7
<pre>C. #Overweight/Obese % of Total BMI D. # w/refusal in pa</pre>	861	53.4	783	59.0	-5.6	809	56.2	-2.8
year w/ % of Total BMI	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Female User Pop 2-74 years	11,694		11,639			11,447		
# w/BMI calculated	1,865	15.9	1,652	14.2	+1.8	1,876	16.4	-0.4
A. # Overweight w/ % of Total BMI	424	22.7	404	24.5	-1.7	476	25.4	-2.6
<ul><li>B. Obese w/</li><li>% of Total BMI</li><li>C. #Overweight/Obese</li><li>% of Total BMI</li><li>D. # w/refusal in pas</li></ul>	665	35.7	637	38.6	-2.9	678	36.1	-0.5
	1,089	58.4	1,041	63.0	-4.6	1,154	61.5	-3.1
year w/ % of Total BMI	3	0.2	0	0.0	+0.2	0	0.0	+0.2

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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	TOTAL	ACTIVE		LATION bution				
	2-5	6-11	12-19	20-24		35-44	45-54	55-74
CURRENT REPORT PERIOD Total # Active Clin # w/ BMI calculated % w/BMI calculated	1,605 576 35.9		793	1,184 179 15.1	272	316	250	1,745 126 7.2
# Overweight % Overweight w/ % Total BMI	93 16.1	86 15.9	176 22.2	44 24.6	70 25.7	86 27.2	68 27.2	45 35.7
# Obese w/	120	148		88	151	184	140	54
% of Total BMI	20.8	27.3	23.7	49.2	55.5	58.2	56.0	42.9
# Overweight or Obese % Overweight or Obese	213 w/	234	364	132	221	270	208	99
% Total BMI	37.0	43.2	45.9	73.7	81.3	85.4	83.2	78.6
<pre># w/refusal in past yr % w/refusal in past yr % Total BMI</pre>		0.0	1	2	0.0	0.0	0.0	0.0
PREVIOUS YEAR PERIOD								
Total # Active Clin # w/ BMI calculated % w/BMI calculated	1,611 507 31.5		571	1,082 206 19.0	303	1,994 367 18.4	265	1,685 177 10.5
# Overweight % Overweight w/	102	39	120	56	81	104	73	68
% Total BMI	20.1	17.0	21.0	27.2	26.7	28.3	27.5	38.4
# Obese % Obese w/	120	62	137	94	156	203	146	64
% of Total BMI	23.7	27.1	24.0	45.6	51.5	55.3	55.1	36.2
# Overweight or Obese % Overweight or Obese	222	101	257	150	237	307	219	132
% Total BMI	43.8	44.1	45.0	72.8	78.2	83.7	82.6	74.6
<pre># w/refusal in past yr % w/refusal in past yr</pre>		0	0	0	0	0	0	0
% Total BMI	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE FROM PREV YR % w/ BMI calculated Overweight Obese Overweight or Obese w/refusal in past yr	+4.4 -4.0 -2.8 -6.8 +0.0	+16.1 -1.2 +0.2 -0.9 +0.0	+7.4 +1.2 -0.3 +0.9 +0.1	-3.9 -2.6 +3.5 +0.9 +1.1	-1.7 -1.0 +4.0 +3.0 +0.0	-2.8 -1.1 +2.9 +1.8 +0.0	-2.2 -0.3 +0.9 +0.6 +0.0	-3.3 -2.7 +6.7 +4.0 +0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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	TOTAL 2-5	ACTIVE 6-11	Age	AL POPU Distri 20-24	bution	35-44	45-54	55-74
BASELINE REPORT PERIOD Total # Active Clin # w/ BMI calculated % w/BMI calculated	1,560 407 26.1	2,253 456 20.2	2,509 600 23.9	1,125 175 15.6	2,049 318 15.5	2,017 351 17.4	292	1,574 319 20.3
<pre># Overweight % Overweight w/ % Total BMI</pre>	62 15.2	76 16.7	124 20.7	47 26.9	106 33.3	102 29.1	100 34.2	115 36.1
<pre># Obese % Obese w/ % of Total BMI</pre>	77 18.9	92 20.2	153 25.5	85 48.6	151 47.5	193 55.0	155 53.1	135 42.3
<pre># Overweight or Obese % Overweight or Obese w % Total BMI</pre>	139 // 34.2	168 36.8	277 46.2	132 75.4	257 80.8	295 84.0	255 87.3	250 78.4
<pre># w/refusal in past yr % w/refusal in past yr % Total BMI</pre>	0 w/ 0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE FROM BASE YR % w/ BMI calculated Overweight Obese Overweight or Obese w/refusal in past yr	+9.8 +0.9 +1.9 +2.8 +0.0	+8.0 -0.8 +7.1 +6.3 +0.0	+5.2 +1.5 -1.8 -0.3 +0.1	-0.4 -2.3 +0.6 -1.7 +1.1	-2.3 -7.6 +8.0 +0.4 +0.0	-1.8 -1.8 +3.2 +1.4 +0.0	+2.9 -4.1	-13.0 -0.3 +0.5 +0.2 +0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

	2-5	6-11		Distri 20-24		35-44	45-54	55-74
CURRENT REPORT PERIOD Total MALE AC # w/ BMI calculated % w/BMI calculated	797 292 36.6	930 242 26.0	1,300 413 31.8	469 65 13.9	783 85 10.9	821 130 15.8	636 96 15.1	716 50 7.0
# Overweight % Overweight w/ % Total BMI	39 13.4	36 14.9	77 18.6	19 29.2	21 24.7	39 30.0	30 31.3	20
# Obese % Obese w/	72	77	111	29	43	67	48	16
% of Total BMI	24.7	31.8	26.9	44.6	50.6	51.5	50.0	32.0
# Overweight or Obese % Overweight or Obese %	111	113	188	48	64	106	78	36
% Total BMI	38.0	46.7	45.5	73.8	75.3	81.5	81.3	72.0
<pre># w/refusal in past yr % w/refusal in past yr</pre>		0	0	0	0	0	0	0
% Total BMI	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
PREVIOUS YEAR PERIOD Total MALE AC # w/ BMI calculated % w/BMI calculated	812 256 31.5	928 125 13.5	1,236 262 21.2	400 63 15.8	774 97 12.5	776 141 18.2	597 110 18.4	694 73 10.5
# Overweight % Overweight w/	49	20	50	17	26	51	34	29
% Total BMI	19.1	16.0	19.1	27.0	26.8	36.2	30.9	39.7
# Obese % Obese w/	73	38	69	28	47	63	54	23
% of Total BMI	28.5	30.4	26.3	44.4	48.5	44.7	49.1	31.5
# Overweight or Obese % Overweight or Obese v	122	58	119	45	73	114	88	52
% Total BMI	47.7	46.4	45.4	71.4	75.3	80.9	80.0	71.2
<pre># w/refusal in past yr % w/refusal in past yr</pre>	0 w/	0	0	0	0	0	0	0
% Total BMI	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE FROM PREV YR % w/ BMI calculated Overweight Obese Overweight or Obese	+5.1 -5.8 -3.9 -9.6	+12.6 -1.1 +1.4 +0.3	-0.4 +0.5 +0.1	-1.9 +2.2 +0.2 +2.4	-1.7 -2.1 +2.1 +0.0	-2.3 -6.2 +6.9 +0.7	-3.3 +0.3 +0.9 +1.3	-3.5 +0.3 +0.5 +0.8
w/refusal in past yr	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

	MALE 2-5		_	Distri	_	35-44	45-54	55-74
BASELINE REPORT PERIOD Total MALE AC # w/ BMI calculated % w/BMI calculated	791 197 24.9	1,114 197 17.7	1,182 284 24.0	410 51 12.4	784 117 14.9	754 120 15.9	564 119 21.1	641 129 20.1
<pre># Overweight % Overweight w/ % Total BMI</pre>	28 14.2	30 15.2	49 17.3	13 25.5	48 41.0	40 33.3	43 36.1	42 32.6
# Obese % Obese w/ % of Total BMI	40 20.3	48 24.4	78 27.5	23 45.1	51 43.6	64 53.3	55 46.2	54 41.9
# Overweight or Obese % Overweight or Obese % Total BMI	68 w/ 34.5	78 39.6	127 44.7	36 70.6	99 84.6	104 86.7	98 82.4	96 74.4
<pre># w/refusal in past yr % w/refusal in past yr % Total BMI</pre>	0 w/ 0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE FROM BASE YR % w/ BMI calculated Overweight Obese Overweight or Obese w/refusal in past yr	+11.7 -0.9 +4.4 +3.5 +0.0	+8.3 -0.4 +7.5 +7.1 +0.0	+7.7 +1.4 -0.6 +0.8 +0.0	+3.7 -0.5 +3.3	-16.3 +7.0		-4.9 +3.8 -1.1	-13.1 +7.4 -9.9 -2.4 +0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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	FEMALE	ACTIVE		AL POPU Distri				
	2-5	6-11	_	20-24		35-44	45-54	55-74
CURRENT REPORT PERIOD Total FEMALE AC # w/ BMI calculated % w/BMI calculated	808 284 35.1	988 300 30.4	1,423 380 26.7	715 114 15.9	1,281 187 14.6	1,209 186 15.4	981 154 15.7	1,029 76 7.4
<pre># Overweight % Overweight w/ % Total BMI</pre>	54 19.0	50 16.7	99 26.1	25 21.9	49 26.2	47 25.3	38 24.7	25 32.9
# Obese w/	48	71	77	59	108	117	92	38
% of Total BMI	16.9	23.7	20.3	51.8	57.8	62.9	59.7	50.0
# Overweight or Obese % Overweight or Obese	102 w/	121	176	84	157	164	130	63
% Total BMI	35.9	40.3	46.3	73.7	84.0	88.2	84.4	82.9
<pre># w/refusal in past yr % w/refusal in past yr % Total BMI</pre>		0.0	1	2 1.8	0.0	0.0	0.0	0.0
PREVIOUS YEAR PERIOD	0.0	0.0	0.3	1.0	0.0	0.0	0.0	0.0
Total FEMALE AC # w/ BMI calculated % w/BMI calculated	799 251 31.4	963 104 10.8	1,397 309 22.1	682 143 21.0	1,269 206 16.2	1,218 226 18.6	901 155 17.2	991 104 10.5
# Overweight % Overweight w/	53	19	70	39	55	53	39	39
% Total BMI	21.1	18.3	22.7	27.3	26.7	23.5	25.2	37.5
# Obese % Obese w/	47	24	68	66	109	140	92	41
% of Total BMI	18.7	23.1	22.0	46.2	52.9	61.9	59.4	39.4
<pre># Overweight or Obese % Overweight or Obese</pre>	100 w/	43	138	105	164	193	131	80
% Total BMI	39.8	41.3	44.7	73.4	79.6	85.4	84.5	76.9
<pre># w/refusal in past yr % w/refusal in past yr</pre>		0	0	0	0	0	0	0
% Total BMI	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE FROM PREV YR % w/ BMI calculated Overweight Obese Overweight or Obese	+3.7 -2.1 -1.8 -3.9	+19.6 -1.6 +0.6 -1.0	+4.6 +3.4 -1.7 +1.7	-5.0 -5.3 +5.6 +0.3	-1.6 -0.5 +4.8 +4.3	-3.2 +1.8 +1.0 +2.8	-1.5 -0.5 +0.4 -0.1	-3.1 -4.6 +10.6 +6.0
w/refusal in past yr	+0.0	+0.0	+0.3	+1.8	+0.0	+0.0	+0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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	FEMALE	ACTIVE	Age	Distri	_	35-44	45-54	55-74
BASELINE REPORT PERIOD Total FEMALE AC # w/ BMI calculated % w/BMI calculated	769 210 27.3	1,139 259 22.7	1,327 316 23.8	715 124 17.3	1,265 201 15.9	1,263 231 18.3	836 173 20.7	933 190 20.4
<pre># Overweight % Overweight w/ % Total BMI</pre>	34 16.2	46 17.8	75 23.7	34 27.4	58 28.9	62 26.8	57 32.9	73 38.4
<pre># Obese % Obese w/ % of Total BMI</pre>	37 17.6	44 17.0	75 23.7	62 50.0	100 49.8	129 55.8	100 57.8	81 42.6
<pre># Overweight or Obese % Overweight or Obese v % Total BMI</pre>	71 v/ 33.8	90 34.7	150 47.5	96 77.4	158 78.6	191 82.7	157 90.8	154 81.1
<pre># w/refusal in past yr % w/refusal in past yr % Total BMI</pre>		0.0	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE FROM BASE YR % w/ BMI calculated Overweight Obese Overweight or Obese w/refusal in past yr	+7.8 +2.8 -0.7 +2.1 +0.0	+7.6 -1.1 +6.7 +5.6 +0.0	+2.9 +2.3 -3.5 -1.2 +0.3	-1.4 -5.5 +1.8 -3.7 +1.8	-1.3 -2.7 +8.0 +5.4 +0.0	-2.9 -1.6 +7.1 +5.5 +0.0	-8.3 +1.9 -6.3	-13.0 -5.5 +7.4 +1.8 +0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Childhood Weight Control

### Denominator(s):

GPRA Denominator: Active Clinical Patients 2-5 for whom a BMI could be calculated, broken out by age groups and gender.

### Numerator(s):

Patients with BMI 85-94%.

GPRA Numerator: Patients with a BMI 95% and up.

Patients with a BMI =>85%.

All patients for whom a BMI could be calculated and who are between the ages of 2 and 5 at the beginning of the Report Period and who do not turn age 6 during the Report Period are included in this measure. Age in the age groups is calculated based on the date of the most current BMI found. For example, a patient may be 2 at the beginning of the time period but is 3 at the time of the most current BMI found. That patient will fall into the age 3 group. CRS looks for the most recent BMI in the report period. CRS calculates BMI at the time the report is run, using NHANES II. A height and weight must be taken on the same day any time during the Report Period. The BMI values for this measure reported differently than in Obesity Assessment since this age group is children ages 2-5, whose BMI values are age-dependent. The BMI values are categorized as At-risk for Overweight for patients with a BMI between 85-94% and Overweight for patients with a BMI of 95%.

Patients whose BMI either is greater or less than the Data Check Limit range shown below will not be included in the report counts for At-risk for Overweight or Overweight.

Low-High Ages	SEX	BMI >= (Risk-Overwt)	BMI >= (Overwt)	DATA CHECK I BMI >	LIMITS BMI <
2-2	MALE	17.7	18.7	36.8	7.2
	FEMALE	17.5	18.6	37.0	7.1
3-3	MALE	17.1	18.0	35.6	7.1
	FEMALE	17.0	18.1	35.4	6.8
4-4	MALE	16.8	17.8	36.2	7.0
	FEMALE	16.7	18.1	36.0	6.9
5-5	MALE	16.9	18.1	36.0	6.9
	FEMALE	16.9	18.5	39.2	6.8

During FY 2006, establish the baseline proportion of children ages 2-5

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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years, with a BMI of 95% or higher.

IHS 2010 Goal: Reduce by 10%

		REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
Active Clinical 2-5 w/BMI	Pts								
(GPRA)		482		471			359		
# w/BMI 85-94% # w/BMI =>95%		74	15.4	92	19.5	-4.2	51	14.2	+1.1
(GPRA) # w/BMI =>85%		85 159	17.6 33.0	98 190		-3.2 -7.4		18.7 32.9	-1.0 +0.1
Active Clinical Age 2	Pts	87		102			65		
# w/BMI 85-94% # w/BMI =>95%		20 18	23.0		16.7 31.4	+6.3 -10.7	11 7	16.9 10.8	
# w/BMI =>85%		38	43.7	49			18	27.7	
Active Clinical Age 3	Pts	130		140			93		
# w/BMI 85-94% # w/BMI =>95%			16.2 19.2		20.7 17.9	-4.6 +1.4	13 19	14.0 20.4	
# w/BMI =>85%		46	35.4	54	38.6	-3.2	32	34.4	+1.0
Active Clinical Age 4	Pts	194		194			160		
# w/BMI 85-94% # w/BMI =>95%			10.8 17.0		20.1 18.0		22 28	13.8 17.5	-2.9 -0.5
# w/BMI =>85%		54	27.8	74	38.1	-10.3	50	31.3	-3.4
Active Clinical Age 5	Pts	71		35			41		
# w/BMI 85-94% # w/BMI =>95%		12 9	12.7	7 6	17.1	-3.1 -4.5	5 13	12.2	+4.7 -19.0
# w/BMI =>85%		21	29.6	13	37.1	-7.6	18	43.9	-14.3

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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### Childhood Weight Control (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
Male Active Clinical Pts Age 2	40		53			34		
# w/BMI 85-94%	9	22.5	10	18.9	+3.6	8	23.5	-1.0
# w/BMI =>95%	9	22.5	20	37.7	-15.2	6	17.6	+4.9
# w/BMI =>85%	18	45.0	30	56.6	-11.6	14	41.2	+3.8
Male Active Clinical								
Pts Age 3	66		65			42		
# w/BMI 85-94%	11	16.7	11	16.9	-0.3	8	19.0	-2.4
# w/BMI =>95%	14	21.2	12	18.5	+2.8	6	14.3	+6.9
# w/BMI =>85%	25	37.9	23	35.4	+2.5	14	33.3	+4.5
Male Active Clinical								
Pts Age 4	96		96			73		
# w/BMI 85-94%	3		18		-15.6	8	11.0	
# w/BMI =>95%	21	21.9	22		-1.0	15	20.5	+1.3
# w/BMI =>85%	24	25.0	40	41.7	-16.7	23	31.5	-6.5
Male Active Clinical								
Pts Age 5	35		21			19		
# w/BMI 85-94%	4				-12.4	2		
# w/BMI =>95%	6			23.8	-6.7	7		
# w/BMI =>85%	10	28.6	10	47.6	-19.0	9	47.4	-18.8
Female Active Clinica								
Pts Age 2	47		49			31		
# w/BMI 85-94%		23.4	7		+9.1	3		
# w/BMI =>95%	9			24.5	-5.3	1	3.2	+15.9
# w/BMI =>85%	20	42.6	19	38.8	+3.8	4	12.9	+29.6

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Childhood Weight Control (con't)

	REPORT PERIOD	0/0	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %	
Female Active Clinic	al								
Pts Age 3	64		75			51			
# w/BMI 85-94%	10	15.6	18	24.0	-8.4	5	9.8	+5.8	
# w/BMI =>95%	11	17.2	13	17.3	-0.1	13	25.5	-8.3	
# w/BMI =>85%	21	32.8	31	41.3	-8.5	18	35.3	-2.5	
Female Active Clinical									
Pts Age 4	98		98			87			
# w/BMI 85-94%	18	18.4	21	21.4	-3.1	14	16.1	+2.3	
# w/BMI =>95%	12	12.2	13	13.3	-1.0	13	14.9	-2.7	
# w/BMI =>85%	30	30.6	34	34.7	-4.1	27	31.0	-0.4	
Female Active Clinic	al								
Pts Age 5	36		14			22			
# w/BMI 85-94%	8	22.2	2	14.3	+7.9	3	13.6	+8.6	
# w/BMI =>95%	3	8.3	1		+1.2	6	27.3		
# w/BMI =>85%	11	30.6	3	21.4	+9.1	9	40.9	-10.4	
			_			-			

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Nutrition and Exercise Education for At Risk Patients

### Denominator(s):

Active Clinical patients ages 6 and older considered overweight (including obese). Broken down by gender.

A: Active Clinical patients ages 6 and older considered obese. Broken down by age and gender.

Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes at least one year prior to the end of Report period, AND at least 2 visits in the past year, AND 2 DM-related visits ever.

### Numerator(s):

Patients provided with medical nutrition counseling in the year prior to end of Report period.

Patients provided specific nutrition education in the year prior to the end of the Report period.

Patients provided specific exercise education in year prior to end of Report period.

Patients provided with other related exercise and nutrition education.

Age of the patient is calculated at beginning of Report period. Overweight is defined as including both obese and overweight categories calculated by BMI. Overweight: Ages 19 and older, BMI equal to or greater than (=>) 25. Obese: Ages 19 and older, BMI equal to or greater than (=>) 30. For ages 18 and under, definition based on standard tables. GPRA+ calculates BMI at the time the report is run, using NHANES II. For 18 and under, a height and weight must be taken on the same day any time in the year prior to the end of the Report period. For 19 through 50, height and weight must be recorded within last 5 years, not required to be on the same day. For over 50, height and weight within last 2 years, not required to be recorded on same day. Medical nutrition counseling defined as: CPT 97802-97804, G0270, G0271; Provider codes 07, 29, 97, 99; Clinic codes 67 (dietary) or 36 (WIC). Nutrition education defined as: POV V65.3 dietary surveillance and counseling; patient education codes ending "-N" (Nutrition), or "-MNT" (or old code "-DT" (Diet)). Exercise education defined as: POV V65.41 exercise counseling; patient education codes ending "-EX" (Exercise). Related exercise and nutrition counseling defined as: patient education codes ending "-LA" (lifestyle adaptation) or containing "OBS-" (obesity).

Increase the proportion of at risk patients who are provided patient education on nutrition and exercise.

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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REPOR PERIO		PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# Overweight Active Clinic patients =>6 1,52		1,403			1,634		
<pre># w/medical nutrition counseling 16 # specific nutrition</pre>	2 10.6	220	15.7	-5.1	298	18.2	-7.6
education provided 17		251	17.9	-6.2	439	26.9	
<pre># w/exercise educ 2 # w/ other exec</pre>	3 1.5	45	3.2	-1.7	112	6.9	-5.3
or nutrition educ	8 0.5	2	0.1	+0.4	7	0.4	+0.1
# Male Overweight Active							
Clinical pts =>6 63	3	549			638		
# w/medical nutrition							
counseling 4 # specific nutrition	9 7.7	78	14.2	-6.5	111	17.4	-9.7
education provided 5	4 8.5	93	16.9	-8.4	153	24.0	-15.5
<pre># w/exercise educ 1 # w/ other exec</pre>	1 1.7	23	4.2	-2.5	40	6.3	-4.5
	2 0.3	0	0.0	+0.3	3	0.5	-0.2
# Female Overweight Active							
Clinical pts =>6 89	5	854			996		
# w/medical nutrition							
counseling 11 # specific nutrition	3 12.6	142	16.6	-4.0	187	18.8	-6.1
education provided 12	4 13.9	158	18.5	-4.6	286	28.7	-14.9
# w/exercise educ 1	2 1.3	22	2.6	-1.2	72	7.2	-5.9
<pre># w/ other exec  or nutrition educ</pre>	6 0.7	2	0.2	+0.4	4	0.4	+0.3

Report Period: Jan 01, 2005 to Dec 31, 2005
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Baseline Period: Jan 01, 2000 to Dec 31, 2000

A. # Obese Active Clinical 862 964 patients =>6 953 # w/medical nutrition 114 12.0 159 18.4 -6.5 184 19.1 -7.1 

 180
 20.9
 -7.7
 267
 27.7

 37
 4.3
 -2.3
 66
 6.8

 -14.5 -4.9# w/ other exec 4 0.4 1 0.1 +0.3 6 0.6 -0.2 or nutrition educ # Male Obese Active 391 Clinical pts =>6 322 373 # w/medical nutrition 32 8.2 54 16.8 -8.6 68 18.2 -10.0 counseling # specific nutrition education provided 35 9.0 65 20.2 -11.2 94 25.2 -16.2 # w/exercise educ 9 2.3 20 6.2 -3.9 25 6.7 -4.4 # w/ other exec 2 0.5 0 0.0 +0.5 3 0.8 -0.3 or nutrition educ # Female Obese Active Clinical pts =>6 562 540 591 # w/medical nutrition 82 14.6 105 19.4 -4.9 116 19.6 -5.0 counseling # specific nutrition education provided 91 16.2 115 21.3 -5.1 173 29.3 -13.1 # w/exercise educ 10 1.8 17 3.1 -1.4 41 6.9 -5.2 # w/exercise educ # w/ other exec or nutrition educ 2 0.4 1 0.2 +0.2 3 0.5 -0.2

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

# Active Diabetics	1,412		1,304			1,156		
<pre># w/medical nutrition</pre>								
counseling	216	15.3	254	19.5	-4.2	378	32.7	-17.4
<pre># specific nutrition</pre>								
<u>-</u>	336		405					
<pre># w/exercise educ # w/ other exec</pre>	134	9.5	188	14.4	-4.9	263	22.8	-13.3
	13	0.9	6	0.5	+0.5	7	0.6	+0.3
# Male Active								
Diabetics	614		582			503		
<pre># w/medical nutrition</pre>								
counseling	85	13.8	120	20.6	-6.8	161	32.0	-18.2
<pre># specific nutrition</pre>								
	131			30.2			53.5	
# w/exercise educ	64	10.4	87	14.9	-4.5	117	23.3	-12.8
# w/ other exec								
or nutrition educ	3	0.5	0	0.0	+0.5	3	0.6	-0.1
# Female Active								
Diabetics	798		722			653		
U / 11 1 1 1								
# w/medical nutrition		16.4	1 2 4	18.6	-2.1	217	33.2	-16.8
<pre>counseling # specific nutrition</pre>	131	16.4	134	18.6	-2.1	21/	33.2	-10.8
# specific nutrition education provided	205	25.7	220	31.7	-6.0	400	62.6	-36.9
# w/exercise educ		8.8	101		-6.0 -5.2			-36.9
# w/exercise educ # w/ other exec	70	0.0	101	14.0	-5.2	140	ZZ.4	-13.6
or nutrition educ	10	1.3	6	0.8	+0 4	4	0.6	+0.6
or macricion caac	10	1.0	O	0.0	10.1	-	0.0	, 0.0

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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TOTAL	OBESE ACTIV				
# Obese Active Clinical	6-11	_	stributio		=>60
# Obese Active Clinical	0-11	12-19	20-39	40-59	=>60
CURRENT REPORT PERIOD					
# Obese Active Clinical	148	188	318	261	38
# Med Nutr Educ	5	9	36	46	18
% w/Med Nutr Educ	3.4	4.8	11.3	17.6	47.4
# w/spec nutr educ	7	11	37	52	19
% w/spec nutr ed	4.7	5.9	11.6	19.9	50.0
II /	0	0	_	11	3
<pre># w/exercise educ % w/exercise ed</pre>	0 0.0	0.0	5 1.6	4.2	7.9
w, excletibe ed	0.0	0.0	1.0	1.2	7.5
# w/other educ	1	0	2	1	0
% w/other educ	0.7	0.0	0.6	0.4	0.0
PREVIOUS YEAR PERIOD					
# Obese Active Clinical	62	137	349	276	38
# Med Nutr Educ	5	12	61	69	12
% w/Med Nutr Educ	8.1	8.8	17.5	25.0	31.6
# w/spec nutr educ	5	12	67	83	13
% w/spec nutr ed	8.1	8.8	19.2	30.1	34.2
-					
# w/exercise educ	0	2	11	21	3
% w/exercise ed	0.0	1.5	3.2	7.6	7.9
# w/other educ	0	0	0	1	0
% w/other educ	0.0	0.0	0.0	0.4	0.0
CHANGE EDOM DDEM VD 0					
CHANGE FROM PREV YR % Med Nutr Educ	-4.7	-4.0	-6.2	-7.4	+15.8
Spec nutr ed	-3.3	-2.9	-7.6		+15.8
w/exercise ed	+0.0	-1.5	-1.6	-3.4	+0.0
w/other educ	+0.7	+0.0	+0.6	+0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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TOTAL	OBESE ACTIV	E CLINIC	AL POPULA	TION		
		Age Di	stributio	n		
# Obese Active Clinical	6-11		20-39		=>60	
BASELINE REPORT PERIOD						
# Obese Active Clinical	92	153	333	304	82	
# Med Nutr Educ	4	7	50	87	36	
% w/Med Nutr Educ	4.3	4.6	15.0	28.6	43.9	
# w/spec nutr educ	6	9	72	131	49	
% w/spec nutr ed	6.5	5.9	21.6	43.1	59.8	
# w/exercise educ	0	0	13	36	17	
% w/exercise ed	0.0	0.0	3.9	11.8	20.7	
# w/other educ	0	0	4	0	2	
% w/other educ	0.0	0.0	1.2	0.0	2.4	
CHANGE FROM BASE YR %						
Med Nutr Educ	-1.0	+0.2	-3.7	-11.0	+3.5	
Spec nutr ed	-1.8	-0.0	-10.0	-23.2	-9.8	
w/exercise ed	+0.0	+0.0	-2.3	-7.6	-12.8	
w/other educ	+0.7	+0.0	-0.6	+0.4	-2.4	

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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MALE (	BESE ACTIVE		L POPULAT	_	
MALE Obese Active Clinical	6-11	12-19	20-39	40-59	=>60
CURRENT REPORT PERIOD MALE Obese Active Clinical # Med Nutr Educ % w/Med Nutr Educ	77 1 1.3	111 5 4.5	104 9 8.7	89 12 13.5	10 5 50.0
<pre># w/spec nutr educ % w/spec nutr ed</pre>	2 2.6	5 4.5	8 7.7	15 16.9	5 50.0
<pre># w/exercise educ % w/exercise ed</pre>	0.0	0.0	2 1.9	7 7.9	0.0
<pre># w/other educ % w/other educ</pre>	1	0.0	1	0.0	0.0
PREVIOUS YEAR PERIOD MALE Obese Active Clinical # Med Nutr Educ % w/Med Nutr Educ	38 4 10.5	69 9 13.0	109 15 13.8	94 22 23.4	12 4 33.3
<pre># w/spec nutr educ % w/spec nutr ed</pre>	4 10.5	9 13.0	19 17.4	28 29.8	5 41.7
<pre># w/exercise educ % w/exercise ed</pre>	0.0	2 2.9	6 5.5	11 11.7	1 8.3
<pre># w/other educ % w/other educ</pre>	0.0	0.0	0.0	0.0	0.0
CHANGE FROM PREV YR % Med Nutr Educ Spec nutr ed w/exercise ed w/other educ	-9.2 -7.9 +0.0 +1.3	-8.5 -8.5 -2.9 +0.0	-5.1 -9.7 -3.6 +1.0	-9.9 -12.9 -3.8 +0.0	+16.7 +8.3 -8.3 +0.0

Report Period: Jan 01, 2005 to Dec 31, 2005

Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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MALE Obese Active Clini		ACTIVE		POPULATION 20-39		=>60
MALE Opese Active Clini	Cal	0-11	12-19	20-39	40-59	=>60
BASELINE REPORT PERIOD						
MALE Obese Active Clini	cal	48	78	107	109	31
# Med Nutr Educ		4	2	15	31	16
% w/Med Nutr Educ		8.3	2.6	14.0	28.4	51.6
# w/spec nutr educ		4	3	23	45	19
% w/spec nutr ed		8.3	3.8	21.5	41.3	61.3
# w/exercise educ		0	0	6	13	6
% w/exercise ed		0.0	0.0	5.6	11.9	19.4
# w/other educ		0	0	2	0	1
% w/other educ		0.0	0.0	1.9	0.0	3.2
CHANGE FROM BASE YR %						
Med Nutr Educ	-	-7.0	+1.9	-5.4	-15.0	-1.6
Spec nutr ed		-5.7	+0.7			-11.3
w/exercise ed		+0.0	+0.0			
w/other educ	-	+1.3	+0.0	-0.9	+0.0	-3.2

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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	FEMALE OB	ESE ACTI	VE CLINIC	CAL POPULA	NOITA	
			Age Di	stributio	n	
FEMALE Obese Active	Clinical	6-11	12-19	20-39	40-59	=>60
CURRENT REPORT PERIC	)D					
FEMALE Obese Active	Clinical	71	77	214	172	28
# Med Nutr Educ		4	4	27	34	13
% w/Med Nutr Educ		5.6	5.2	12.6	19.8	46.4
# w/spec nutr educ		5	6	29	37	14
% w/spec nutr ed		7.0	7.8	13.6	21.5	50.0
# w/exercise educ		0	0	3	4	3
% w/exercise ed		0.0	0.0	1.4	2.3	10.7
# w/other educ		0	0	1	1	0
% w/other educ		0.0	0.0	0.5	0.6	0.0
PREVIOUS YEAR PERIO	)					
FEMALE Obese Active	Clinical	24	68	240	182	26
# Med Nutr Educ		1	3	46	47	8
% w/Med Nutr Educ		4.2	4.4	19.2	25.8	30.8
# w/spec nutr educ		1	3	48	55	8
% w/spec nutr ed		4.2	4.4	20.0	30.2	30.8
# w/exercise educ		0	0	5	10	2
% w/exercise ed		0.0	0.0	2.1	5.5	7.7
# w/other educ		0	0	0	1	0
% w/other educ		0.0	0.0	0.0	0.5	0.0
CHANGE FROM PREV YR	%					
Med Nutr Educ		+1.5	+0.8	-6.5		+15.7
Spec nutr ed		+2.9	+3.4	-6.4	-8.7	+19.2
w/exercise ed		+0.0	+0.0	-0.7	-3.2	+3.0
w/other educ		+0.0	+0.0	+0.5	+0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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]	FEMALE OBES	E ACTIVI	E CLINICA	L POPULAT	TION	
			Age Dis	tribution	ı	
FEMALE Obese Active (	Clinical	6-11	12-19	20-39	40-59	=>60
BASELINE REPORT PERIO	OD					
FEMALE Obese Active (	Clinical	44	75	226	195	51
# Med Nutr Educ		0	5	35	56	20
% w/Med Nutr Educ		0.0	6.7	15.5	28.7	39.2
# w/spec nutr educ		2	6	49	86	30
% w/spec nutr ed		4.5	8.0	21.7	44.1	58.8
ш/		0	0	7	23	11
# w/exercise educ		_	•	•	_	
% w/exercise ed		0.0	0.0	3.1	11.8	21.6
# w/other educ		0	0	2	0	1
% w/other educ		0.0	0.0	0.9	0.0	2.0
CHANGE FROM BASE YR	%					
Med Nutr Educ		+5.6	-1.5	-2.9	-9.0	+7.2
Spec nutr ed			-0.2			
w/exercise ed		+0.0			-9.5	
w/other educ		+0.0				-2.0
W/ CCITCI CAAC				J . 1		2.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Cardiovascular Disease and Cholesterol Screening

### Denominator(s):

GPRA Denominator: Active Clinical patients ages 23 and older, broken down by gender.

User Population patients ages 23 and older, broken down by gender. Active Clinical patients diagnosed with ischemic heart disease prior to the Report period and with at least two IHD-related visits any time during the Report period. Broken down by gender.

#### Numerator(s):

GPRA Numerator: Patients with documented blood cholesterol screening any time in the past 5 years.

Patients with high total cholesterol levels, defined as equal to or greater than (=>) 240.

Patients with LDL completed in the past 5 years, regardless of result.

Patients with LDL <= 100
Patients with LDL 101-130
Patients with LDL 131-160
Patients with LDL > 160

Age is calculated at the beginning of the Report period.

Ischemic Heart Disease (IHD) defined as: One visit prior to the Report period AND 2 or more visits any time during the Report period with diagnosis of ischemic heart disease (Purpose of Visit 410.0-412.\*, 414.0-414.9, 428.\* or 429.2 recorded in the V POV file).

Counts all Y instances reported, regardless of the results of the measurement. Total Cholesterol definition: CPT 82465; LOINC taxonomy; site-populated taxonomy DM AUDIT CHOLESTEROL TAX. LDL Definition: CPT 83721; LOINC taxonomy; site-populated taxonomy DM AUDIT LDL CHOLESTEROL TAX.

During FY 2006, increase the proportion of patients ages 23 and older that receive blood cholesterol screening.

Chol Screen: HP 1998 baseline: 67%; HP 2010 target: 80% -- High

Cholesterol: HP2010 target: 17%

REPORT % PREV YR % CHG from BASE % CHG from PERIOD PERIOD PREV YR % PERIOD BASE %

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Cardiovascular Disease and Cholesterol Screening (con't)

	REPORT PERIOD	ક	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
Active Clinical	Pts							
=> 23 (GPRA)	8,363		8,080			7,939		
# w/Cholesterol	screen							
w/in 5 yrs (GPRA)	1,448	17.3	1,332	16.5	+0.8	893	11.2	+6.1
# w/ High Chol => 240	100	1.2	82	1.0	+0.2	55	0.7	+0.5
<pre># w/LDL done in past 5 yrs</pre>	1 105	14.2	436	5.4	+8.8	474	6.0	+8.2
# w/LDL =<100	1,185 141	1.7	152	1.9	-0.2	165	2.1	-0.4
# w/LDL 101-130	121	1.4	132	1.6	-0.2	138	1.7	-0.3
# w/LDL 131-160	51	0.6	55	0.7	-0.1	59	0.7	-0.1
# w/LDL >160	18	0.2	19	0.2	-0.0	21	0.3	-0.0
Male Active Clir	nical							
Pts =>23	3,306		3,159			3,075		
# w/Cholesterol	screen							
w/in 5 yrs # w/ High Chol	518	15.7	486	15.4	+0.3	367	11.9	+3.7
=> 240 # w/LDL done	40	1.2	32	1.0	+0.2	21	0.7	+0.5
in past 5 yrs	509	15.4	184	5.8	+9.6	209	6.8	+8.6
# w/LDL =<100	56	1.7	61	1.9	-0.2	71	2.3	-0.6
# w/LDL 101-130	55	1.7	60	1.9	-0.2	62	2.0	-0.4
# w/LDL 131-160	28	0.8	32	1.0	-0.2	35	1.1	-0.3
# w/LDL >160	4	0.1	6	0.2	-0.1	7	0.2	-0.1
Female Active Cl	linical							
Pts =>23	5,057		4,921			4,864		
# w/Cholesterol	screen							
w/in 5 yrs # w/ High Chol	930	18.4	846	17.2	+1.2	526	10.8	+7.6
=> 240	60	1.2	50	1.0	+0.2	34	0.7	+0.5
# w/LDL done	676	12 /	252	E 1	.0.2	265	E 1	.7.0
in past 5 yrs # w/LDL =<100	676 85	13.4 1.7	252 91	5.1 1.8	+8.2 -0.2	265 94	5.4 1.9	+7.9 -0.3
# W/LDL =<100 # W/LDL 101-130	66	1.7	72	1.5	-0.2	76	1.6	-0.3
# W/LDL 101-130 # W/LDL 131-160	23	0.5	23	0.5	-0.2	24	0.5	-0.3
# W/LDL >160	14	0.3	13	0.3	+0.0	14	0.3	-0.0

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Cardiovascular Disease and Cholesterol Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
User Population => 23	12,127		11,948			11,510		
<pre># w/Cholesterol w/in 5 yrs</pre>	screen 1,527	12.6	1,397	11.7	+0.9	911	7.9	+4.7
<pre># w/ High Chol =&gt; 240 # w/LDL done</pre>	103	0.8	84	0.7	+0.1	55	0.5	+0.4
in past 5 yrs # w/LDL =<100 # w/LDL 101-130	1,216 146 125	10.0 1.2 1.0	461 155 136	3.9 1.3 1.1	+6.2 -0.1 -0.1	478 165 138	4.2 1.4 1.2	+5.9 -0.2 -0.2
# w/LDL 131-160 # w/LDL >160	53 21	0.4	57 22	0.5	-0.0 -0.0	59 22	0.5	-0.1 -0.0
Male User Pop Pts =>23	5,448		5,353			5,161		
# w/Cholesterol w/in 5 yrs	screen 561	10.3	525	9.8	+0.5	374	7.2	+3.1
<pre># w/ High Chol =&gt; 240 # w/LDL done</pre>	42	0.8	34	0.6	+0.1	21	0.4	+0.4
in past 5 yrs # w/LDL =<100 # w/LDL 101-130 # w/LDL 131-160 # w/LDL >160	529 60 56 30 7	9.7 1.1 1.0 0.6 0.1	202 64 61 34 8	3.8 1.2 1.1 0.6 0.1	+5.9 -0.1 -0.1 -0.1 -0.0	213 71 62 35 8	4.1 1.4 1.2 0.7 0.2	+5.6 -0.3 -0.2 -0.1 -0.0
Female User Pop Pts =>23	6,679		6,595			6,349		
<pre># w/Cholesterol w/in 5 yrs # w/ High Chol</pre>	screen 966	14.5	872	13.2	+1.2	537	8.5	+6.0
=> 240 # w/LDL done	61	0.9	50	0.8	+0.2	34	0.5	+0.4
in past 5 yrs # w/LDL =<100 # w/LDL 101-130 # w/LDL 131-160 # w/LDL >160	687 86 69 23 14	10.3 1.3 1.0 0.3 0.2	259 91 75 23 14	3.9 1.4 1.1 0.3 0.2	+6.4 -0.1 -0.1 -0.0 -0.0	265 94 76 24 14	4.2 1.5 1.2 0.4 0.2	+6.1 -0.2 -0.2 -0.0 -0.0
, : _ : _ : _ :				٠. ۵	3.0		٠. ـ	5.0

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Cardiovascular Disease and Cholesterol Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pt	S							
w/IHD DX	209		191			129		
# w/Cholesterol so	reen							
w/in 5 yrs # w/ High Chol	82	39.2	74	38.7	+0.5	46	35.7	+3.6
=> 240 # w/LDL done	6	2.9	5	2.6	+0.3	3	2.3	+0.5
in past 5 yrs	111	53.1	43	22.5	+30.6	38	29.5	+23.7
# w/LDL =<100	24	11.5	23	12.0	-0.6	21	16.3	-4.8
# w/LDL 101-130	15	7.2	13	6.8	+0.4	12	9.3	-2.1
# w/LDL 131-160	5	2.4	6	3.1	-0.7	3	2.3	+0.1
# w/LDL >160	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Male Active Clinic	al Pts							
w/IHD DX	133		122			78		
# w/Cholesterol so	reen							
w/in 5 yrs	52	39.1	50	41.0	-1.9	33	42.3	-3.2
# w/ High Chol								
=> 240	4	3.0	4	3.3	-0.3	2	2.6	+0.4
# w/LDL done								
in past 5 yrs	70	52.6	30	24.6	+28.0	29	37.2	+15.5
# w/LDL =<100	16	12.0	14	11.5	+0.6	16	20.5	-8.5
# w/LDL 101-130	11	8.3	11	9.0	-0.7	9	11.5	-3.3
# w/LDL 131-160	2	1.5	4	3.3	-1.8	2	2.6	-1.1
# w/LDL >160	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Female Active Clin	nical Pts							
w/IHD DX	76		69			51		
# w/Cholesterol so	reen							
w/in 5 yrs	30	39.5	24	34.8	+4.7	13	25.5	+14.0
# w/ High Chol								
=> 240	2	2.6	1	1.4	+1.2	1	2.0	+0.7
# w/LDL done	4.7			100	0= 1	•		0.5
in past 5 yrs	41	53.9	13	18.8	+35.1	9	17.6	+36.3
# w/LDL =<100	8	10.5	9	13.0	-2.5	5	9.8	+0.7
# w/LDL 101-130	4	5.3	2	2.9	+2.4	3	5.9	-0.6
# w/LDL 131-160	3	3.9	2	2.9	+1.0	1	2.0	+2.0
# w/LDL >160	0	0.0	0	0.0	+0.0	0	0.0	+0.0

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Cardiovascular Disease and Blood Pressure Control

### Denominator(s):

All Active Clinical patients ages 20 and over, broken down by gender. All User Population patients ages 20 and older, broken down by gender. Active Clinical patients diagnosed with ischemic heart disease prior to the Report period and with at least two IHD-related visits any time during the Report period. Broken down by gender.

#### Numerator(s):

Patients with Blood Pressure value documented at least twice in prior two years.

Patients with normal Blood Pressure (BP), defined as < 120/80, i.e., the mean systolic value is less than (<) 120 AND the mean diastolic value is less than (<) 80.

Patients with Pre Hypertension I BP, defined as => 120/80 and < 130/80, i.e., the mean systolic value is equal to or greater than (=>) 120 and less than (<) 130 AND the mean diastolic value is equal to 80. Patients with Pre Hypertension II BP, defined as => 130/80 and <140/90, i.e., the mean systolic value is equal to or greater than (=>) 130 and less than (<) 140 AND the mean diastolic value is equal to or greater than (=>) 80 and less than (<) 90.

Patients with Stage 1 Hypertension Blood Pressure (BP), defined as => 140/90 and <160/100, i.e., the mean systolic value is equal to or greater than (=>) 140 and less than (<) 160 AND the mean diastolic value is equal to or greater than (=>) 90 and less than (<) 100.

Patients with Stage 2 Hypertension BP, defined as  $\Rightarrow$  160/100, i.e., the mean systolic value is equal to or greater than ( $\Rightarrow$ ) 160 AND the mean diastolic value is equal to or greater than ( $\Rightarrow$ ) 100.

Age of the patient is calculated at beginning of the Report period.

Ischemic Heart Disease (IHD) defined as: One visit prior to the Report period AND 2 or more visits any time during the Report period with diagnosis of ischemic heart disease (Purpose of Visit 410.0-412.\*, 414.0-414.9, 428.\* or 429.2 recorded in the V POV file).

CRS uses mean of last 3 Blood Pressures documented on non-ER visits in the past two years. If 3 BPs are not available, uses mean of last 2 non-ER BPs. If a visit contains more than 1 BP, the lowest BP will be used, defined as having the lowest systolic value. The mean Systolic value is calculated by adding the last 3 (or 2) systolic values and dividing by 3 (or 2). The mean Diastolic value is calculated by adding the diastolic values from the last 3 (or 2) blood pressures and dividing by 3 (or 2). If the systolic and diastolic values do not BOTH meet the current category, then the value that is least controlled determines the category.

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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For FY 2006, increase the proportion of patients ages 18 and older whose blood pressure has been assessed in past two years and establish the baseline rate for individuals with known ischemic heart disease and appropriate BP assessment.

High Blood Pressure (140/90) Performance:

HP 2010 Goal: 16%

BP Assessed: IHS 2010 Goal: 95%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
Active Clinical Pat	ients							
ages 20 and older	9,108		8,752			8,585		
# w/ BPs								
documented	7,656	84.1	7,283	83.2	+0.8	6,770	78.9	+5.2
# w/Normal BP	1,487	16.3	1,414	16.2	+0.2	1,728	20.1	-3.8
# w/PRE HTN I BP	1,815	19.9	1,698	19.4	+0.5	1,610	18.8	+1.2
# w/PRE HTN II BP	2,493	27.4	2,364	27.0	+0.4	1,972	23.0	+4.4
# w/Stage 1								
HTN BP	1,684	18.5	1,617	18.5	+0.0	1,284	15.0	+3.5
# w/Stage 2								
HTN BP	177	1.9	190	2.2	-0.2	176	2.1	-0.1
Male Active Clinica	l Patient	S						
ages 20 and older	3,600		3,412			3,312		
# w/ BPs								
documented	2,931		•		+1.5	•		
# w/Normal BP		7.8		8.3	-0.5	344		
# w/PRE HTN I BP		15.4	498		+0.8	_		
# w/PRE HTN II BP	1,104	30.7	1,041	30.5	+0.2	873	26.4	+4.3
# w/Stage 1								
HTN BP	902	25.1	804	23.6	+1.5	603	18.2	+6.8
# w/Stage 2								
HTN BP	93	2.6	100	2.9	-0.3	81	2.4	+0.1

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Cardiovascular Disease and Blood Pressure Control (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
Female Active Clinical Patients								
ages 20 and older	5,508		5,340			5,273		
# w/ BPs								
documented	4,725	85.8	4,557	85.3	+0.4	4,348	82.5	+3.3
# w/Normal BP	1,208	21.9	1,131		+0.8	1,384	26.2	-4.3
# w/PRE HTN I BP	1,262	22.9	1,200		+0.4		20.7	+2.3
# w/PRE HTN II BP	1,389		1,323		+0.4	1,099	20.8	
# w/Stage 1	•		•			•		
HTN BP	782	14.2	813	15.2	-1.0	681	12.9	+1.3
# w/Stage 2								
HTN BP	84	1.5	90	1.7	-0.2	95	1.8	-0.3
User Pop Patients								
ages 20 and older	13,413		13,174			12,710		
# w/ BPs								
documented	7,831	58.4	7,463	56.6	+1.7	6,882	54.1	+4.2
# w/Normal BP	1,511	11.3	1,449		+0.3	1,751	13.8	-2.5
# w/PRE HTN I BP	1,854	13.8	1,730	13.1	+0.7	1,638	12.9	+0.9
# w/PRE HTN II BP	2,561	19.1	2,424	18.4	+0.7	2,007	15.8	+3.3
# w/Stage 1								
HTN BP	1,727	12.9	1,664	12.6	+0.2	1,305	10.3	+2.6
# w/Stage 2								
HTN BP	178	1.3	196	1.5	-0.2	181	1.4	-0.1
Male User Pop Pation	ents							
ages 20 and older	6,061		5,957			5,739		
# w/ BPs								
documented	3,038	50.1	2,826	47.4	+2.7	2,475	43.1	+7.0
# w/Normal BP		4.7		4.9	-0.2	348	6.1	-1.3
# w/PRE HTN I BP	571	9.4	512	8.6	+0.8	535	9.3	
# w/PRE HTN II BP	1,150		1,074	18.0	+0.9	893	15.6	+3.4
# w/Stage 1								
HTN BP	937	15.5	841	14.1	+1.3	615	10.7	+4.7
# w/Stage 2 HTN BP	94	1.6	105	1.8	-0.2	84	1.5	+0.1

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004

Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Cardiovascular Disease and Blood Pressure Control (con't)

	REPORT PERIOD	olo	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
Female User Pop Patients								
ages 20 and older	7,352		7,217			6,971		
# w/ BPs								
documented	4,793	65.2	4,637	64.3	+0.9	4,407	63.2	+2.0
# w/Normal BP	1,225	16.7	1,155	16.0	+0.7	1,403	20.1	-3.5
# w/PRE HTN I BP	1,283	17.5	1,218	16.9	+0.6	1,103	15.8	+1.6
# w/PRE HTN II BP	1,411	19.2	1,350	18.7	+0.5	1,114	16.0	+3.2
# w/Stage 1								
HTN BP	790	10.7	823	11.4	-0.7	690	9.9	+0.8
# w/Stage 2								
HTN BP	84	1.1	91	1.3	-0.1	97	1.4	-0.2
Active Clinical Pts w/Ischemic Heart								
disease DX	209		191			129		
/ DD-								
# w/ BPs documented	200	100.0	101	100.0	+0.0	128	99.2	+0.8
# w/Normal BP	209	12.4	35	18.3	+0.0 -5.9	34	26.4	-13.9
** *			46		+2.7	23	17.8	+9.0
# w/PRE HTN I BP	56					_	20.2	
# w/PRE HTN II BP	67	32.1	48	25.1	+6.9	26	20.2	+11.9
# w/Stage 1	53	25.4	Г1	26 7	-1.3	40	31.0	-5.6
HTN BP	5.3	∠5.4	51	26.7	-1.3	40	31.0	-5.0
# w/Stage 2	7	2 2	11	г о	2 4	_	2 0	0 5
HTN BP	/	3.3	11	5.8	-2.4	5	3.9	-0.5
Male Active Clinical	. Pts							
w/ischemic heart	122		100			7.0		
disease DX	133		122			78		
# w/ BPs								
documented	133	100.0	122	100.0	+0.0	77	98.7	+1.3
# w/Normal BP	16	12.0	20	16.4	-4.4	23	29.5	-17.5
# w/PRE HTN I BP	32	24.1	34	27.9	-3.8	12	15.4	+8.7
# w/PRE HTN II BP	45	33.8	31	25.4	+8.4	21	26.9	+6.9
# w/Stage 1								
HTN BP	35	26.3	32	26.2	+0.1	19	24.4	+2.0
# w/Stage 2								
HTN BP	5	3.8	5	4.1	-0.3	2	2.6	+1.2

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Cardiovascular Disease and Blood Pressure Control (con't)

	REPORT PERIOD	%	PREV YR PERIOD	90	CHG from PREV YR %	BASE PERIOD	90	CHG from BASE %
Female Active Clinic	al Pts							
disease DX	76		69			51		
# w/ BPs								
documented	76	100.0	69	100.0	+0.0	51	100.0	+0.0
# w/Normal BP	10	13.2	15	21.7	-8.6	11	21.6	-8.4
# w/PRE HTN I BP	24	31.6	12	17.4	+14.2	11	21.6	+10.0
# w/PRE HTN II BP	22	28.9	17	24.6	+4.3	5	9.8	+19.1
# w/Stage 1								
HTN BP	18	23.7	19	27.5	-3.9	21	41.2	-17.5
# w/Stage 2								
HTN BP	2	2.6	6	8.7	-6.1	3	5.9	-3.3

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Controlling High Blood Pressure

#### Denominator(s):

Active Clinical patients ages 46 through 85 diagnosed with hypertension and no documented history of ESRD, broken down by gender.

#### Numerator(s):

Number of patients with Blood Pressure value documented during the Report period.

Patients with normal Blood Pressure (BP), defined as < 120/80, i.e., the mean systolic value is less than (<) 120 AND the mean diastolic value is less than (<) 80.

Patients with Pre Hypertension I BP, defined as  $\Rightarrow$  120/80 and < 130/80, i.e., the mean systolic value is equal to or greater than ( $\Rightarrow$ ) 120 and less than ( $\Rightarrow$ ) 130 AND the mean diastolic value is equal to 80. Patients with Pre Hypertension II BP, defined as  $\Rightarrow$  130/80 and  $\Rightarrow$  130/80 and 1es, the mean systolic value is equal to or greater than ( $\Rightarrow$ ) 130 and less than ( $\Rightarrow$ ) 140 AND the mean diastolic value is equal to or greater than ( $\Rightarrow$ ) 80 and less than ( $\Rightarrow$ ) 90.

Patients with Stage 1 Hypertension Blood Pressure (BP), defined as => 140/90 and <160/100, i.e., the mean systolic value is equal to or greater than (=>) 140 and less than (<) 160 AND the mean diastolic value is equal to or greater than (=>) 90 and less than (<) 100.

Patients with Stage 2 Hypertension BP, defined as  $\Rightarrow$  160/100, i.e., the mean systolic value is equal to or greater than ( $\Rightarrow$ ) 160 AND the mean diastolic value is equal to or greater than ( $\Rightarrow$ ) 100.

Age of the patient is calculated at beginning of the Report period. ESRD defined as CPT 90921, 90925 or POV 585.1-585.9. For Denominator, hypertension is defined as diagnosis (POV or problem list) 401.\* prior to the Report period, and at least one hypertension POV during the Report period.

CRS uses mean of last 3 Blood Pressures documented on non-ER visits during the Report Period. If 3 BPs are not available, uses mean of last 2 non-ER BPs. If a visit contains more than 1 BP, the lowest BP will be used, defined as having the lowest systolic value. The mean Systolic value is calculated by adding the last 3 (or 2) systolic values and dividing by 3 (or 2). The mean Diastolic value is calculated by adding the diastolic values from the last 3 (or 2) blood pressures and dividing by 3 (or 2). If the systolic and diastolic values do not BOTH meet the current category, then the value that is least controlled determines the category.

Increase the percentage of enrolled members 46-85 years of age who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (less than 140/90) during the measurement year.

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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High Blood Pressure (=>140/90) Performance: HP 2010 Goal: 16%

BP Assessed: IHS 2010 Goal: 95%

# W/ BPS documented 1,286 99.1 1,187 99.2  # w/Normal BP 78 6.0 74 6.2 -0.2 63 6.4 -0.3  # w/Normal BP 225 17.3 145 12.2 +5.1 142 14.3 +3.0  # w/Pre HTN II BP 429 33.1 390 32.9 +0.2 301 30.3 +2.7  # w/Stage 1  HTN BP 477 36.7 477 40.2 -3.4 386 38.9 -2.2  # w/Stage 2  HTN BP 78 5.9 84 7.1 -1.1 82 8.3 -2.3  Male Active Clinical Pts 46-85 w/HTN 583 537 444  # w/BPS documented 575 98.6 529 98.5 +0.1 435 98.0 +0.7  # w/Normal BP 29 5.0 33 6.1 -1.2 35 7.9 -2.9  # w/Pre HTN II BP 92 15.8 61 11.4 +4.4 67 15.1 +0.7  # w/Pre HTN II BP 93 34.0 182 33.9 +0.1 143 32.2 +1.8  # w/Stage 1  HTN BP 38 6.5 39 7.3 -0.7 30 6.8 -0.2  Female Active Clinical Pts 46-85 w/HTN 715 650 548  # w/Pre HTN II BP 198 40.9 41 6.3 +0.5 28 5.1 +1.7  # w/Pre HTN II BP 199.4 641 98.6 +0.8 539 98.4 +1.1  # w/Pre HTN II BP 191 182 183 18.6 84 12.9 +5.7 75 13.7 +4.9  # w/Pre HTN II BP 133 18.6 84 12.9 +5.7 75 13.7 +4.9  # w/Pre HTN II BP 231 32.3 208 32.0 +0.3 158 28.8 +3.5  # w/Pre HTN II BP 259 36.2 263 40.5 -4.2 226 41.2 -5.0		REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
# w/ BPS documented									
documented         1,286         99.1         1,170         98.6         +0.5         974         98.2         +0.9           # w/Normal BP         78         6.0         74         6.2         -0.2         63         6.4         -0.3           # w/Pre HTN I BP         225         17.3         145         12.2         +5.1         142         14.3         +3.0           # w/Pre HTN II BP         429         33.1         390         32.9         +0.2         301         30.3         +2.7           # w/Stage 1         HTN BP         477         36.7         477         40.2         -3.4         386         38.9         -2.2           # w/Stage 2         HTN BP         477         5.9         84         7.1         -1.1         82         8.3         -2.3           Male Active Clinical Pts         46-85 w/HTN         583         537         444         435         98.0         40.7         40.2         40.2         40.1 <th< td=""><td>46-85 w/HTN dx</td><td>1,298</td><td></td><td>1,187</td><td></td><td></td><td>992</td><td></td><td></td></th<>	46-85 w/HTN dx	1,298		1,187			992		
# w/Normal BP	# w/ BPs								
# w/Pre HTN I BP	documented	1,286	99.1	1,170	98.6	+0.5	974	98.2	+0.9
# w/Pre HTN II BP	# w/Normal BP	_	6.0	74		-0.2	63		-0.3
# w/Stage 1 HTN BP		225		145		+5.1			
HTN BP		429	33.1	390	32.9	+0.2	301	30.3	+2.7
# w/Stage 2 HTN BP 77 5.9 84 7.1 -1.1 82 8.3 -2.3  Male Active Clinical Pts 46-85 w/HTN 583 537 444  # w/ BPS documented 575 98.6 529 98.5 +0.1 435 98.0 +0.7 # w/Normal BP 29 5.0 33 6.1 -1.2 35 7.9 -2.9 # w/Pre HTN I BP 92 15.8 61 11.4 +4.4 67 15.1 +0.7 # w/Stage 1 HTN BP 218 37.4 214 39.9 -2.5 160 36.0 +1.4 # w/Stage 2 HTN BP 38 6.5 39 7.3 -0.7 30 6.8 -0.2  Female Active Clinical Pts 46-85 w/HTN 715 650 548  # w/ BPS documented 711 99.4 641 98.6 +0.8 539 98.4 +1.1 # w/Normal BP 49 6.9 41 6.3 +0.5 28 5.1 +1.7 # w/Pre HTN I BP 133 18.6 84 12.9 +5.7 75 13.7 +4.9 # w/Pre HTN II BP 231 32.3 208 32.0 +0.3 158 28.8 +3.5 # w/Stage 1 HTN BP 259 36.2 263 40.5 -4.2 226 41.2 -5.0 # w/Stage 2		477	36 7	477	40 2	-3 4	386	38 9	-2 2
Male Active Clinical Pts 46-85 w/HTN 583 537 444  # w/ BPs documented 575 98.6 529 98.5 +0.1 435 98.0 +0.7 # w/Normal BP 29 5.0 33 6.1 -1.2 35 7.9 -2.9 # w/Pre HTN I BP 92 15.8 61 11.4 +4.4 67 15.1 +0.7 # w/Pre HTN II BP 198 34.0 182 33.9 +0.1 143 32.2 +1.8 # w/Stage 1 HTN BP 218 37.4 214 39.9 -2.5 160 36.0 +1.4 # w/Stage 2 HTN BP 38 6.5 39 7.3 -0.7 30 6.8 -0.2  Female Active Clinical Pts 46-85 w/HTN 715 650 548  # w/ BPs documented 711 99.4 641 98.6 +0.8 539 98.4 +1.1 # w/Normal BP 49 6.9 41 6.3 +0.5 28 5.1 +1.7 # w/Pre HTN I BP 133 18.6 84 12.9 +5.7 75 13.7 +4.9 # w/Pre HTN II BP 231 32.3 208 32.0 +0.3 158 28.8 +3.5 # w/Stage 1 HTN BP 259 36.2 263 40.5 -4.2 226 41.2 -5.0 # w/Stage 2		1,,	30.7	1,,	10.2	3.1	300	30.7	2.2
# w/ BPS documented 575 98.6 529 98.5 +0.1 435 98.0 +0.7 # w/Normal BP 29 5.0 33 6.1 -1.2 35 7.9 -2.9 # w/Pre HTN I BP 92 15.8 61 11.4 +4.4 67 15.1 +0.7 # w/Stage 1 HTN BP 218 37.4 214 39.9 -2.5 160 36.0 +1.4 # w/Stage 2 HTN BP 38 6.5 39 7.3 -0.7 30 6.8 -0.2  Female Active Clinical Pts 46-85 w/HTN 715 650 548  # w/ BPS documented 711 99.4 641 98.6 +0.8 539 98.4 +1.1 # w/Normal BP 49 6.9 41 6.3 +0.5 28 5.1 +1.7 # w/Pre HTN I BP 133 18.6 84 12.9 +5.7 75 13.7 +4.9 # w/Stage 1 # w/Pre HTN I BP 231 32.3 208 32.0 +0.3 158 28.8 +3.5 # w/Stage 1 HTN BP 259 36.2 263 40.5 -4.2 226 41.2 -5.0 # w/Stage 2		77	5.9	84	7.1	-1.1	82	8.3	-2.3
# w/ BPS documented 575 98.6 529 98.5 +0.1 435 98.0 +0.7 # w/Normal BP 29 5.0 33 6.1 -1.2 35 7.9 -2.9 # w/Pre HTN I BP 92 15.8 61 11.4 +4.4 67 15.1 +0.7 # w/Stage 1 HTN BP 218 37.4 214 39.9 -2.5 160 36.0 +1.4 # w/Stage 2 HTN BP 38 6.5 39 7.3 -0.7 30 6.8 -0.2  Female Active Clinical Pts 46-85 w/HTN 715 650 548  # w/ BPS documented 711 99.4 641 98.6 +0.8 539 98.4 +1.1 # w/Normal BP 49 6.9 41 6.3 +0.5 28 5.1 +1.7 # w/Pre HTN I BP 133 18.6 84 12.9 +5.7 75 13.7 +4.9 # w/Stage 1 # w/Pre HTN I BP 231 32.3 208 32.0 +0.3 158 28.8 +3.5 # w/Stage 1 HTN BP 259 36.2 263 40.5 -4.2 226 41.2 -5.0 # w/Stage 2	Male Active Clinical	. Pts							
documented         575         98.6         529         98.5         +0.1         435         98.0         +0.7           # w/Normal BP         29         5.0         33         6.1         -1.2         35         7.9         -2.9           # w/Pre HTN I BP         92         15.8         61         11.4         +4.4         67         15.1         +0.7           # w/Pre HTN II BP         198         34.0         182         33.9         +0.1         143         32.2         +1.8           # w/Stage 1         HTN BP         218         37.4         214         39.9         -2.5         160         36.0         +1.4           # w/Stage 2         HTN BP         38         6.5         39         7.3         -0.7         30         6.8         -0.2           Female Active Clinical Pts 46-85 w/HTN         715         650         548           # w/ BPs documented         711         99.4         641         98.6         +0.8         539         98.4         +1.1           # w/Normal BP         49         6.9         41         6.3         +0.5         28         5.1         +1.7	46-85 w/HTN	583		537			444		
# w/Normal BP	# w/ BPs								
# W/Pre HTN I BP 92 15.8 61 11.4 +4.4 67 15.1 +0.7 # W/Pre HTN II BP 198 34.0 182 33.9 +0.1 143 32.2 +1.8 # W/Stage 1	documented	575	98.6	529	98.5	+0.1	435	98.0	+0.7
# w/Pre HTN II BP	# w/Normal BP	29	5.0	33	6.1	-1.2	35	7.9	-2.9
# w/Stage 1 HTN BP	# w/Pre HTN I BP	92	15.8	61	11.4	+4.4	67	15.1	+0.7
HTN BP 218 37.4 214 39.9 -2.5 160 36.0 +1.4 # w/Stage 2 HTN BP 38 6.5 39 7.3 -0.7 30 6.8 -0.2 Female Active Clinical Pts 46-85 w/HTN 715 650 548 # w/ BPs documented 711 99.4 641 98.6 +0.8 539 98.4 +1.1 # w/Normal BP 49 6.9 41 6.3 +0.5 28 5.1 +1.7 # w/Pre HTN I BP 133 18.6 84 12.9 +5.7 75 13.7 +4.9 # w/Pre HTN II BP 231 32.3 208 32.0 +0.3 158 28.8 +3.5 # w/Stage 1 HTN BP 259 36.2 263 40.5 -4.2 226 41.2 -5.0 # w/Stage 2		198	34.0	182	33.9	+0.1	143	32.2	+1.8
# w/Stage 2 HTN BP 38 6.5 39 7.3 -0.7 30 6.8 -0.2  Female Active Clinical Pts 46-85 w/HTN 715 650 548  # w/ BPs documented 711 99.4 641 98.6 +0.8 539 98.4 +1.1 # w/Normal BP 49 6.9 41 6.3 +0.5 28 5.1 +1.7 # w/Pre HTN I BP 133 18.6 84 12.9 +5.7 75 13.7 +4.9 # w/Pre HTN II BP 231 32.3 208 32.0 +0.3 158 28.8 +3.5 # w/Stage 1 HTN BP 259 36.2 263 40.5 -4.2 226 41.2 -5.0 # w/Stage 2	# w/Stage 1								
# W/ BPS documented 711 99.4 641 98.6 +0.8 539 98.4 +1.1 # w/Normal BP 49 6.9 41 6.3 +0.5 28 5.1 +1.7 # w/Pre HTN I BP 133 18.6 84 12.9 +5.7 75 13.7 +4.9 # w/Stage 1 HTN BP 259 36.2 263 40.5 -4.2 226 41.2 -5.0 # w/Stage 2		218	37.4	214	39.9	-2.5	160	36.0	+1.4
Female Active Clinical Pts 46-85 w/HTN 715 650 548  # w/ BPs documented 711 99.4 641 98.6 +0.8 539 98.4 +1.1 # w/Normal BP 49 6.9 41 6.3 +0.5 28 5.1 +1.7 # w/Pre HTN I BP 133 18.6 84 12.9 +5.7 75 13.7 +4.9 # w/Pre HTN II BP 231 32.3 208 32.0 +0.3 158 28.8 +3.5 # w/Stage 1 HTN BP 259 36.2 263 40.5 -4.2 226 41.2 -5.0 # w/Stage 2	<del>-</del>								
# w/ BPs documented 711 99.4 641 98.6 +0.8 539 98.4 +1.1 # w/Normal BP 49 6.9 41 6.3 +0.5 28 5.1 +1.7 # w/Pre HTN I BP 133 18.6 84 12.9 +5.7 75 13.7 +4.9 # w/Pre HTN II BP 231 32.3 208 32.0 +0.3 158 28.8 +3.5 # w/Stage 1 HTN BP 259 36.2 263 40.5 -4.2 226 41.2 -5.0 # w/Stage 2	HTN BP	38	6.5	39	7.3	-0.7	30	6.8	-0.2
# w/ BPs documented 711 99.4 641 98.6 +0.8 539 98.4 +1.1 # w/Normal BP 49 6.9 41 6.3 +0.5 28 5.1 +1.7 # w/Pre HTN I BP 133 18.6 84 12.9 +5.7 75 13.7 +4.9 # w/Pre HTN II BP 231 32.3 208 32.0 +0.3 158 28.8 +3.5 # w/Stage 1 HTN BP 259 36.2 263 40.5 -4.2 226 41.2 -5.0 # w/Stage 2									
documented         711         99.4         641         98.6         +0.8         539         98.4         +1.1           # w/Normal BP         49         6.9         41         6.3         +0.5         28         5.1         +1.7           # w/Pre HTN I BP         133         18.6         84         12.9         +5.7         75         13.7         +4.9           # w/Pre HTN II BP         231         32.3         208         32.0         +0.3         158         28.8         +3.5           # w/Stage 1         HTN BP         259         36.2         263         40.5         -4.2         226         41.2         -5.0           # w/Stage 2	46-85 W/HTN	715		650			548		
# w/Normal BP 49 6.9 41 6.3 +0.5 28 5.1 +1.7 # w/Pre HTN I BP 133 18.6 84 12.9 +5.7 75 13.7 +4.9 # w/Pre HTN II BP 231 32.3 208 32.0 +0.3 158 28.8 +3.5 # w/Stage 1 HTN BP 259 36.2 263 40.5 -4.2 226 41.2 -5.0 # w/Stage 2	# w/ BPs								
# w/Pre HTN I BP 133 18.6 84 12.9 +5.7 75 13.7 +4.9 # w/Pre HTN II BP 231 32.3 208 32.0 +0.3 158 28.8 +3.5 # w/Stage 1 HTN BP 259 36.2 263 40.5 -4.2 226 41.2 -5.0 # w/Stage 2	documented					+0.8	539		
<pre># w/Pre HTN II BP</pre>		49		41			_		
# w/Stage 1 HTN BP 259 36.2 263 40.5 -4.2 226 41.2 -5.0 # w/Stage 2		133		84		+5.7	75		
HTN BP 259 36.2 263 40.5 -4.2 226 41.2 -5.0 # w/Stage 2		231	32.3	208	32.0	+0.3	158	28.8	+3.5
	HTN BP	259	36.2	263	40.5	-4.2	226	41.2	-5.0
11 DF 3.5 3.5 45 0.9 -1.5 32 9.5 -4.0	# w/Stage 2 HTN BP	39	5.5	45	6.9	-1.5	52	9.5	-4.0

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

Comprehensive CVD-Related Assessment

#### Denominator(s):

Active Clinical patients ages 46 and older who are not diabetic (no diagnosis ever).

User Population patients ages 46 and older who are not diabetic (no diagnosis ever).

Active Diabetic patients ages 46 and older, defined as all Active Clinical patients diagnosed with diabetes prior to the Current Report period, AND at least 2 visits during the Current Report period, AND 2 DM-related visits ever.

Active Clinical patients diagnosed with ischemic heart disease prior to the Report period and with at least two CVD-related visits any time during the Report period. Broken down by gender.

#### Numerator(s):

BP Assessed: Patients with Blood Pressure value documented at least twice in prior two years.

LDL Assessed: Patients with LDL completed in past five years, regardless of result.

Tobacco Use Assessed: Patients who have been screened for tobacco use during the Current Report period.

BMI Available: Patients for whom a BMI could be calculated, including refusals in the past year.

Lifestyle Counseling: Patients who have received any lifestyle adaptation counseling, including medical nutrition counseling, or nutrition, exercise or other lifestyle education during the Current Report period. Depression Screening: Patients screened for depression or diagnosed with a mood disorder at any time during the Report period, including documented refusals in past year.

Patients with ALL assessments above.

Age of the patient is calculated at beginning of the Report period. Definition for patients without diabetes is no diabetes diagnosis ever (POV 250.00-250.93).

Ischemic Heart Disease (IHD) defined as: One visit prior to the Report period AND 2 or more visits any time during the Report period with diagnosis of ischemic heart disease (Purpose of Visit 410.0-412.\*, 414.0-414.9, 428.\* or 429.2 recorded in the V POV file).

For BP: Having a minimum of 2 Blood Pressures documented on non-ER visits during the Report period.

For LDL, finds the most recent test done in the last 5 years, regardless of the results of the measurement. LDL Definition: CPT 83721; LOINC taxonomy; site-populated taxonomy DM AUDIT LDL CHOLESTEROL TAX. Tobacco

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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screening is defined as at least one of the following: 1. Any health factor for category Tobacco documented during Current Report period; 2. Tobacco-related diagnoses (POV or current Active Problem List) 305.1 or V15.82; 3. Dental code 1320; 4. Any patient education code containing "TO-", "-TO" or "-SHS.

For BMI, CRS calculates BMI at the time the report is run, using NHANES II. For 19 through 50, height and weight must be recorded within last 5 years, not required to be on the same day. For over 50, height and weight within last 2 years, not required to be recorded on same day. Refusals include REF (refused), NMI (not medically indicated) and UAS (unable to screen) and must be documented during the past year. For ages 19 and older, the height and the weight must be refused during the past year and are not required to be on the same visit.

Medical nutrition counseling defined as: CPT 97802-97804, G0270, G0271; Provider codes 07, 29, 97, 99; Clinic codes 67 (dietary) or 36 (WIC). Nutrition education defined as: POV V65.3 dietary surveillance and counseling; patient education codes ending "-N" (Nutrition) or "-MNT" (or old code "-DT" (Diet)). Exercise education defined as: POV V65.41 exercise counseling; patient education codes ending "-EX" (Exercise). Related exercise and nutrition counseling defined as: patient education codes ending "-LA" (lifestyle adaptation) or containing "OBS-" (obesity).

Depression Screening/Mood Disorder DX: Any of the following during the Report Period: A) Depression Screening: Exam Code 36, POV V79.0, or BHS problem code 14.1 (screening for depression) or refusal, defined as any PCC refusal in past year with Exam Code 36; or B) Mood Disorder DX: At least two visits in PCC or BHS during the Report period with POV for: Major Depressive Disorder, Dysthymic Disorder, Depressive Disorder NOS, Bipolar I or II Disorder, Cyclothymic Disorder, Bipolar Disorder NOS, Mood Disorder Due to a General Medical Condition, Substance-induced Mood Disorder, or Mood Disorder NOS. These POV codes are: 296.\*, 291.89, 292.84, 293.83, 300.4, 301.13, or 311 or BHS POV 14 or 15.

Proposed GPRA FY 2007: During FY 2007, establish the baseline proportion of at risk patients who have a comprehensive assessment for all CVD-related risk factors.

IHS 2010 Goals:
BP Assessed: 95%
LDL Assessed: 85%
Tobacco Assessed: 50%
BMI Measured: 45%
Lifestyle Counseling: 75%
Depression Screen: 20%

All Assessments: 15%

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Comprehensive CVD-Related Assessment (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
Active Clinical Pts w/no DM dx	=>46 2,224		2,138			2,094		
<pre># w/ BPs documented w/in 2 yrs # w/LDL done</pre>	1,968	88.5	1,864	87.2	+1.3	1,702	81.3	+7.2
<pre>w/in 5 yrs # w/Tobacco Screening</pre>	262	11.8	39	1.8	+10.0	36	1.7	+10.1
<pre>w/iobacco screenii w/in 1 yr # w/BMI calculated</pre>	18	0.8	15	0.7	+0.1	20	1.0	-0.1
or refusal	141	6.3	170	8.0	-1.6	146	7.0	-0.6
<pre># w/ lifestyle educ w/in 1 yr # w/ Depression scre</pre>	97	4.4	86	4.0	+0.3	164	7.8	-3.5
DX, or refusal	96	4.3	105	4.9	-0.6	77	3.7	+0.6
# w/ ALL	1	0.0	0	0.0	+0.0	0	0.0	+0.0
User Pop Pts =>46 w/no DM dx	3,104		3,031			2,866		
<pre># w/ BPs documented w/in 2 yrs # w/LDL done</pre>	2,021	65.1	1,912	63.1	+2.0	1,734	60.5	+4.6
w/in 5 yrs	265	8.5	41	1.4	+7.2	37	1.3	+7.2
<pre># w/Tobacco Screenin w/in 1 yr # w/BMI calculated</pre>	ng 18	0.6	16	0.5	+0.1	21	0.7	-0.2
or refusal # w/ lifestyle	149	4.8	185	6.1	-1.3	157	5.5	-0.7
educ w/in 1 yr	. 101	3.3	89	2.9	+0.3	183	6.4	-3.1
# w/ Depression scre DX, or refusal	eening, 96	3.1	106	3.5	-0.4	80	2.8	+0.3
# w/ ALL	1	0.0	0	0.0	+0.0	0	0.0	+0.0

### \*\*\* IHS 2006 Clinical Performance Report \*\*\*

### DEMO HOSPITAL

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Comprehensive CVD-Related Assessment (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Diabetic Pts => 46	1,100		1,011			893		
<pre># w/ BPs documented w/in 2 yrs # w/LDL done</pre>	1,086	98.7	993	98.2	+0.5	864	96.8	+2.0
w/in 5 yrs	530	48.2	274	27.1	+21.1	278	31.1	+17.1
<pre># w/Tobacco Screening w/in 1 yr # w/BMI calculated</pre>	10	0.9	6	0.6	+0.3	8	0.9	+0.0
or refusal	192	17.5	221	21.9	-4.4	457	51.2	-33.7
<pre># w/ lifestyle educ w/in 1 yr # w/ Depression scree</pre>	324	29.5	370	36.6	-7.1	577	64.6	-35.2
DX, or refusal	48	4.4	43	4.3	+0.1	46	5.2	-0.8
# w/ ALL	1	0.1	0	0.0	+0.1	0	0.0	+0.1
Active Clinical Pts								
w/Ischemic Heart dise	ease 209		191			130		
<pre># w/BPs documented w/in 2 yrs # w/LDL done</pre>	209	100.0	191	100.0	+0.0	128	98.5	+1.5
w/in 5 yrs	111	53.1	43	22.5	+30.6	38	29.2	+23.9
<pre># w/Tobacco Screening w/in 1 yr # w/BMI calculated</pre>	2	1.0	1	0.5	+0.4	1	0.8	+0.2
or refusal # w/lifestyle educ	22	10.5	32	16.8	-6.2	40	30.8	-20.2
w/in 1 yr	52	24.9	55	28.8	-3.9	73	56.2	-31.3
# w/Depression_screen	_		_			_		
DX, or refusal # w/ALL	8	3.8	7	3.7	+0.2 +0.0	7 0	5.4	-1.6 +0.0
T W/ALL	U	0.0	U	0.0	10.0	U	0.0	10.0

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Beta-Blocker Treatment After a Heart Attack

#### Denominator(s):

Active Clinical patients 35 and older discharged for an AMI during the first 51 weeks of the Report period, were not readmitted for any diagnosis within seven days of discharge, and do not have a contraindication/previous adverse reaction to beta-blocker therapy. Broken down by gender.

User Population patients 35 and older discharged for an AMI during the first 51 weeks of the Report period, were not readmitted for any diagnosis within seven days of discharge, and do not have a contraindication/previous adverse reaction to beta-blocker therapy. Broken down by gender.

#### Numerator(s):

Patients with active prescription for beta-blockers no later than 7 days after first discharge (i.e. prescribed during stay or at discharge or current at time of admission).

Age is calculated at the beginning of the Report period. Acute Myocardial Infarction (AMI) defined as POV 410.\*1 (i.e. first eligible episode of an AMI) with Service Category H. If patient has more than one episode of AMI during the first 51 weeks of the Report period, CRS will include only the first discharge.

#### Denominator Exclusions:

- 1. Patients with Discharge Type of Irregular (AMA), Transferred, or contains "Death."
- 2. Patients with contraindications to beta-blockers, defined as occurring anytime through discharge date: A) Asthma 2 diagnoses (POV) of 493\* on different visit dates; B) Hypotension 1 diagnosis of 458\*; C) Heart block >1 degree 1 diagnosis of 426.0, 426.12, 426.13, 426.2, 426.3, 426.4, 426.51, 426.52, 426.53, 426.54, or 426.7; D) Sinus bradycardia 1 diagnosis of 427.81; or E) COPD 2 diagnoses on different visit dates of 491.20, 491.21, 496, or 506.4, or a combination of any of these codes, such as 1 visit with 491.20 and 1 with 496.
- 3. Documented beta blocker allergy/ADR, defined as occurring anytime through discharge date: A) POV 995.0-995.3 AND E942.0; B) beta block\* entry in ART (Patient Allergies File); or C) beta block\*, bblock\* or b block\* contained within Problem List or in Provider Narrative field for any POV 995.0-995.3 or V14.8.
- 4. Patients readmitted for any diagnosis within seven days of discharge.

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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To be included in the numerator, patient must have an active prescription (not discontinued as of [discharge date + 7 days]) either prescribed prior to admission, during the inpatient stay, or within seven days after discharge. "Active" prescription defined as: Days Prescribed > ((Discharge Date + 7 days) - Order Date).

Beta-blocker medication codes defined with medication taxonomy BGP CMS BETA BLOCKER MEDS or all meds with VA Drug Class CV100.

For FY 2006, improve the rate of patients receiving beta-blocker treatment after AMI.

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts hospitalized for AMI	35+ 5		1			2		
# w/beta-blocker Rx	3	60.0	0	0.0	+60.0	2	100.0	-40.0
Male Active Clinical 35+ hospitalized for AMI			1			1		
# w/beta-blocker Rx	1	100.0	0	0.0	+100.0	1	100.0	+0.0
Female Active Clinic 35+ hospitalized for								
AMI	4		0			1		
# w/beta-blocker Rx	2	50.0	0	0.0	+50.0	1	100.0	-50.0
User Pop Pts 35+ hospitalized for AMI	5		1			3		
# w/beta-blocker Rx	3	60.0	0	0.0	+60.0	2	66.7	-6.7

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Beta-Blocker Treatment After a Heart Attack (con't)

	REPORT % PERIOD	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Male User Pop Pts 35+ hospitalized for AMI	1	1			2		
# w/beta-blocker Rx	1 100.0	0	0.0	+100.0	1	50.0	+50.0
Female User Pop Pts 35+ hospitalized for AMI	4	0			1		
# w/beta-blocker Rx	2 50.0	0	0.0	+50.0	1	100.0	-50.0

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Persistence of Beta-Blocker Treatment After a Heart Attack

#### Denominator(s):

Active Clinical patients 35 and older diagnosed with an AMI six months prior to the Report period through the first six months of the Report period and do not have a contraindication/previous adverse reaction to beta-blocker therapy. Broken down by gender.

User Population patients 35 and older diagnosed with an AMI six months prior to the Report period through the first six months of the Report period and do not have a contraindication/previous adverse reaction to beta-blocker therapy. Broken down by gender.

#### Numerator(s):

Patients with a 180-day course of treatment with beta-blockers following first discharge date or visit date, including previous active prescriptions.

Age is calculated at the beginning of the Report period. Acute Myocardial Infarction (AMI) defined as POV 410.\*0 or 410.\*1. AMI diagnosis may be made at an inpatient or outpatient visit but must occur between six months prior to beginning of Report period through first six months of the Report period. Inpatient visit defined as Service Category of H (Hospitalization). If patient has more than one episode of AMI during the timeframe, CRS will include only the first hospital discharge or ambulatory visit.

#### Denominator Exclusions:

- 1. If inpatient visit, patients with Discharge Type of Irregular (AMA), Transferred, or contains "Death."
- 2. Patients with contraindications to beta-blockers, defined as occurring anytime through discharge date: A) Asthma 2 diagnoses (POV) of 493\* on different visit dates; B) Hypotension 1 diagnosis of 458\*; C) Heart block >1 degree 1 diagnosis of 426.0, 426.12, 426.13, 426.2, 426.3, 426.4, 426.51, 426.52, 426.53, 426.54, or 426.7; D) Sinus bradycardia 1 diagnosis of 427.81; or E) COPD 2 diagnoses on different visit dates of 491.20, 491.21, 496, or 506.4, or a combination of any of these diagnoses, such as one visit with 491.20 and one with 496.
- 3. Documented beta blocker allergy/ADR, defined as occurring anytime through discharge/visit date: A) POV 995.0-995.3 AND E942.0; B) beta block\* entry in ART (Patient Allergies File); or C) beta block\*, bblock\* or b block\* contained within Problem List or in Provider Narrative field for any POV 995.0-995.3 or V14.8.

To be included in the numerator, patients must have a beta-blocker days'

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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supply >= 135 days in the 180 days following discharge date for inpatient visits or visit date for ambulatory visits. Prior active beta-blocker prescriptions can be included if the treatment days fall within the 180 days following discharge/visit date. Prior active prescription defined as most recent beta-blocker prescription (see codes below) prior to admission/visit date with the number of days supply equal to or greater than the discharge/visit date minus the prescription date.

NOTE: If the medication was started and then discontinued, CRS will recalculate the # Days Prescribed by subtracting the prescription date (i.e. visit date) from the V Medication Discontinued Date. Example: Rx Date=11/15/2003, Discontinued Date=11/19/2003, Recalculated # Days Prescribed=4.

Example of patient included in the numerator who has prior active prescription:

- Admission Date: 2/1/2004, Discharge Date: 2/15/2004
- Must have 135 days prescribed by 8/13/2004 (Discharge Date+180)
- Prior Beta-Blocker Rx Date: 1/15/2004
- # Days Prescribed: 60 (treats patient through 3/15/2004)
- Discharge Date minus Rx Date: 2/15/2004-1/15/2004 = 31, 60 is >= 31, prescription is considered Prior Active Rx
- 3/15/2004 is between 2/15 and 8/13/2004, thus remainder of Prior

Active Rx can be counted toward 180-day treatment period

- # Remaining Days Prescribed from Prior Active Rx:
   (60-(Discharge Date-Prior Rx Date) = 60-(2/15/20041/15/2004) = 60-31 = 29
- Rx #2: 4/1/2004, # Days Prescribed: 90
- Rx #3: 7/10/2004, #Days Prescribed: 90
- Total Days Supply Prescribed between 2/15 and 8/13/2004: 29+90+90=209

Beta-blocker medication codes defined with medication taxonomy BGP CMS BETA BLOCKER MEDS or all meds with VA Drug Class CV100.

For FY 2006, improve the rate of patients receiving persistent beta-blocker treatment after AMI.

REPORT % PREV YR % CHG from BASE % CHG from PERIOD PERIOD PREV YR % PERIOD BASE %

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Persistence of Beta-Blocker Treatment After a Heart Attack (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
Active Clinical Pts 3 w/ AMI DX	35+ 15		17			7		
# w/180 day beta- blocker treatment	10	66.7	14	82.4	-15.7	3	42.9	+23.8
Male Active Clinical 35+ w/ AMI DX	Pts 9		10			6		
# w/180 day beta- blocker treatment	7	77.8	7	70.0	+7.8	3	50.0	+27.8
Female Active Clinica 35+ w/ AMI DX	al Pts 6		7			1		
# w/180 day beta- blocker treatment	3	50.0	7	100.0	-50.0	0	0.0	+50.0
User Pop Pts 35+ w/ AMI DX	16		17			8		
# w/180-day beta- blocker treatment	10	62.5	14	82.4	-19.9	3	37.5	+25.0
Male User Pop Pts 35- w/ AMI DX	9		10			7		
# w/180-day beta- blocker treatment	7	77.8	7	70.0	+7.8	3	42.9	+34.9
Female User Pop Pts 3 w/ AMI DX	35+ 7		7			1		
# w/180-day beta- blocker treatment	3	42.9	7	100.0	-57.1	0	0.0	+42.9

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Cholesterol Management After Acute Cardiovascular Event

#### Denominator(s):

Active Clinical patients ages 18 to 75 diagnosed within the year prior to the beginning of the Report period with acute myocardial infarction (AMI), coronary artery bypass graft (CABG), or percutaneous transluminal coronary angioplasty (PTCA). Broken down by gender.

User Population patients ages 18 to 75 diagnosed within the year prior to the beginning of the Report period with acute myocardial infarction (AMI), coronary artery bypass graft (CABG), or percutaneous transluminal coronary angioplasty (PTCA). Broken down by gender.

#### Numerator(s):

Patients with LDL completed 60-365 days after diagnosis, regardless of result.

Patients with LDL <=100, completed 60-365 days after diagnosis. Patients with LDL 101-130, completed 60-365 days after diagnosis. Patients with LDL >130, completed 60-365 days after diagnosis.

Age of the patient is calculated at the beginning of the Report period.

AMI defined as POV 410.\*0 or 410.\*1. PTCA defined as 1) V Procedure 36.01, 36.02, 36.05, 36.09 or 2) CPT 33140, 92980-92982, 92984, 92995, 92996. CABG defined as: 1) V Procedure 36.1\*, 36.2 or 2) CPT 33510-33514, 33516-33519, 33521-33523, 33533-33536. If diagnosis occurred at an inpatient visit, discharge date will be used instead of visit date.

For each of the numerators, finds the most recent LDL test from the Report period end date that is between 60 and 365 days after diagnosis. LDL defined as: CPT 83721; LOINC taxonomy; site-populated taxonomy DM AUDIT LDL CHOLESTEROL TAX.

For FY 2006, improve the rate for patients with LDL test after acute CVD event.

REPORT % PREV YR % CHG from BASE % CHG from PERIOD PERIOD PREV YR % PERIOD BASE %

### \*\*\* IHS 2006 Clinical Performance Report \*\*\*

DEMO HOSPITAL

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Cholesterol Management After Acute Cardiovascular Event (con't)

	REPORT PERIOD	%	PREV YR PERIOD	0/0	CHG from PREV YR %		%	CHG from BASE %
Active Clinical pts with dx of AMI, CABO								
or PTCA	18		15			9		
# w/LDL done	4	22.2	0	0.0	+22.2	3	33.3	-11.1
# w/LDL <=100	1	5.6	0	0.0	+5.6	2	22.2	
# w/LDL 101-130 # w/LDL >130	1 1	5.6 5.6	0 0	0.0	+5.6 +5.6	0 1	0.0 11.1	
Male Active Clinical	l pts							
18-75 with DX AMI, (			9			6		
or PTCA	11		9			6		
# w/LDL done	3	27.3	0	0.0	+27.3	2		
# w/LDL <=100 # w/LDL 101-130	1 1	9.1 9.1	0	0.0	+9.1 +9.1	1 0	16.7	-7.6 +9.1
# W/LDL 101-130 # W/LDL >130	1	9.1	0	0.0	+9.1	1	16.7	
Female Active Clinic								
18-75 with DX AMI, (or PTCA	CABG 7		6			3		
OI PICA	7		0			3		
# w/LDL done	1	14.3	0	0.0	+14.3	1	33.3	
# w/LDL <=100 # w/LDL 101-130	0	0.0	0	0.0	+0.0 +0.0	1 0	33.3	
# W/LDL >130	0	0.0	0	0.0	+0.0	0	0.0	+0.0
User Pop pts 18-75	7							
with dx of AMI, CABO or PTCA	19		16			9		
# w/LDL done	4	21.1	0	0.0	+21.1	3	33.3	-12.3
# w/LDL <=100	1	5.3	0	0.0	+5.3	2	22.2	
# w/LDL 101-130 # w/LDL >130	1 1	5.3 5.3	0	0.0	+5.3 +5.3	0 1	0.0	+5.3 -5.8
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Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Cholesterol Management After Acute Cardiovascular Event (con't)

	PORT	90	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
Male User Pop pts 18-75 with DX AMI, CABG or PTCA	11		10			6		
# w/LDL done # w/LDL <=100 # w/LDL 101-130 # w/LDL >130	3 1 1 1	27.3 9.1 9.1 9.1	0 0 0	0.0 0.0 0.0	+27.3 +9.1 +9.1 +9.1	2 1 0 1	33.3 16.7 0.0 16.7	
Female User Pop pts 18-75 with DX AMI, CABG or PTCA	8		6			3		
# w/LDL done # w/LDL <=100 # w/LDL 101-130 # w/LDL >130	1 0 0 0	12.5 0.0 0.0 0.0	0 0 0	0.0 0.0 0.0	+12.5 +0.0 +0.0 +0.0	1 1 0 0		

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Prenatal HIV Testing

#### Denominator(s):

GPRA Denominator: All pregnant female patients with no documented miscarriage or abortion and with no recorded HIV diagnosis ever.

#### Numerator(s):

Patients who received counseling and/or patient education about HIV in the past 20 months.

GPRA Numerator: Patients who received HIV test during the past 20 months, including refusals in past 20 months.

A: Number of documented refusals in past 20 months.

Pregnancy is defined as at least two visits with POV V22.0-V23.9, 640.\*-648.\*, 651.\*-676.\* during the past 20 months, with one diagnosis occurring during the reporting period and with no documented miscarriage or abortion occurring after the second pregnancy POV. The time period is extended to include patients who were pregnant during the Report period but whose initial diagnosis (and HIV test) were documented prior to Report period. Miscarriage definition: (1) POV: 630, 631, 632, 633\*, 634\*, (2) CPT 59812, 59820, 59821, 59830. Abortion definition: (1) POV: 635\*, 636\* 637\*, (2) CPT: 59840, 59841, 59850, 59851, 59852, 59855, 59856, 59857. Pregnant patients with any HIV diagnosis ever are excluded, defined as: POV or Problem List codes 042.0-044.9, V08, or 795.71. HIV counseling: V65.44; or patient education codes containing "HIV-" or "-HIV" or patient education codes containing HIV diagnosis 042.0-044.9, V08, 795.71. HIV test: CPTs 86689, 86701-86703, 87390, 87391; LOINC taxonomy; site-populated taxonomy BGP GPRA HIV TESTS; or Refusal Lab Test HIV in the past 20 months.

In FY 2006, increase the proportion of pregnant female patients screened for HIV.

IHS 2010 Goal: 95%

REPORT % PREV YR % CHG from BASE % CHG from PERIOD PERIOD PREV YR % PERIOD BASE %

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Prenatal HIV Testing (con't)

	REPORT PERIOD	90	PREV YR PERIOD	જ	CHG from PREV YR %		%	CHG from BASE %
Pregnant Female Pts w/no HIV (GPRA)	520		485			545		
# w/HIV education # w/HIV test	3	0.6	1	0.2	+0.4	0	0.0	+0.6
(GPRA)	311	59.8	43	8.9	+50.9	58	10.6	+49.2
<pre>A. # refusals w/ % of total tests</pre>	2	0.6	0	0.0	+0.6	0	0.0	+0.6

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

HIV Quality of Care

### Denominator(s):

All patients ages 13 and older with at least 2 direct care visits (i.e. not Contract/CHS) with HIV diagnosis during the Report Period, including 1 HIV diagnosis in last 6 months.

#### Numerator(s):

Patients who received CD4 test only (without HIV viral load) during the Report Period.

Patients who received HIV viral load only (without CD4) during the Report Period.

Patients who received both CD4 and HIV viral load during the Report Period.

Total Numerators 1, 2 and 3.

Age is calculated at beginning of the Report Period. HIV diagnosis defined as: POV or Problem List 042.0-044.9, V08, or 795.71. Lab test CD4 count defined as: CPT 86361, LOINC taxonomy and site-populated taxonomy BGP GPRA CD4 Tests. HIV viral load, as measured by PCR or a comparable test: CPT 87536, 87539; LOINC taxonomy; and site-populated taxonomy BGP GPRA HIV Viral Load Tests.

Increase the proportion of HIV-infected adolescents and adults who received testing consistent with current Public Health Service treatment guidelines.

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
Pts >13 w/HIV Dx	4		4			3		
<pre># w/CD4 only # w/viral load</pre>	0	0.0	0	0.0	+0.0	0	0.0	+0.0
only	1	25.0	4	100.0	-75.0	0	0.0	+25.0
# w/both	3	75.0	0	0.0	+75.0	0	0.0	+75.0
TOTAL # w/								
any tests	4	100.0	4	100.0	+0.0	0	0.0	+100.0

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

### Chlamydia Testing

### Denominator(s):

Female Active Clinical patients ages 16 through 25.

- A. Female Active Clinical 16-20.
- B. Female Active Clinical 21-25.

Female User Population patients ages 16 through 25.

- A. Female User Population 16-20.
- B. Female User Population 21-25.

#### Numerator(s):

Patients tested for Chlamydia during the Report Period.

Age is calculated at beginning of the Report Period. Chlamydia test defined as: V73.88, V73.98; CPT 87110, 87270, 87320, 87490-92, 87810; site-populated taxonomy BGP GPRA CHLAMYDIA TESTS; LOINC taxonomy

Increase the proportion of female patients ages 16 through 25 who have annual Chlamydia screening.

	REPORT PERIOD	જ	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	olo	CHG from BASE %
Female Active Clinica 16-25	.l 1,519		1,503			1,483		
# w/Chlamydia Screen	521	34.3	147	9.8	+24.5	346	23.3	+11.0
A. Female Active Clin 16-20	ical 836		803			763		
# w/Chlamydia Screen	252	30.1	67	8.3	+21.8	145	19.0	+11.1
B. Female Active Clin 21-25	ical 683		700			720		
# w/Chlamydia Screen	269	39.4	80	11.4	+28.0	201	27.9	+11.5

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Chlamydia Testing (con't)

	REPORT PERIOD	%	PREV YR PERIOD	0/0	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female User Populatio 16-25	n 2,280		2,280			2,224		
# w/Chlamydia Screen	544	23.9	154	6.8	+17.1	356	16.0	+7.9
A. Female User Popula 16-20	tion 1,272		1,253			1,179		
# w/Chlamydia Screen	264	20.8	71	5.7	+15.1	151	12.8	+7.9
B. Female User Popula 21-25	tion 1,008		1,027			1,045		
# w/Chlamydia Screen	280	27.8	83	8.1	+19.7	205	19.6	+8.2

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#### Osteoporosis Management

#### Denominator(s):

Female Active Clinical patients ages 67 and older who had a new fracture occurring six months (180 days) prior to the Report period through the first six months of the Report period with no osteoporosis screening or treatment in year prior to the fracture.

Female User Population patients ages 67 and older who had a new fracture occurring six months (180 days) prior to the Report period through the first six months of the Report period with no osteoporosis screening or treatment in year prior to the fracture.

#### Numerator(s):

Patients treated or tested for osteoporosis after the fracture.

Age is calculated at the beginning of the Report period. Fractures do not include fractures of finger, toe, face, or skull. CRS will search for the first (i.e. earliest) fracture during the period six months (180) days prior to the beginning of the Report period and the first six months of the Report period. If multiple fractures are present, only the first fracture will be used.

The Index Episode Start Date is the date the fracture was diagnosed. If the fracture was diagnosed at an outpatient visit (Service Category A, S, or O), the Index Episode Start Date is equal to the Visit Date. If diagnosed at an inpatient visit (Service Category H), the Index Episode Start Date is equal to the Discharge Date.

### Denominator Exclusions

- 1. Patients receiving osteoporosis screening or treatment in the year (365 days) prior to the Index Episode Start Date. Osteoporosis screening or treatment is defined as a Bone Mineral Density (BMD) test (see below for codes) or receiving any osteoporosis therapy medication (see below for codes).
- 2. Patients with a fracture diagnosed at an outpatient visit who ALSO had a fracture within 60 days prior to the Index Episode Start Date.
- 3. Patients with a fracture diagnosed at an inpatient visit who ALSO had a fracture within 60 days prior to the ADMISSION DATE.

Osteoporosis treatment and testing is defined as: 1) For fractures diagnosed at an outpatient visit: A) A non-discontinued prescription within six months (180 days) of the Index Episode Start Date (i.e. visit date) or B) a BMD test within six months of the Index Episode Start Date. 2) For fractures diagnosed at an inpatient visit, a BMD test

Report Period: Jan 01, 2005 to Dec 31, 2005
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performed during the inpatient stay.

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Fracture codes: 1) CPTs: 21800, 21805, 21810, 21820, 21825, 22305, 22310,
22315, 22318, 22319, 22325, 22326, 22327, 22328, 23500, 23505, 23515,
23570, 23575, 23585, 23600, 23605, 23615, 23616, 23620, 23625, 23630,
23665, 23670, 23675, 23680, 24500, 24505, 24515, 24516, 24530, 24535,
24538, 24545, 24546, 24560, 24565, 24566, 24575, 24576, 24577, 24579,
24582, 24586, 24587, 24620, 24635, 24650, 24655, 24665, 24666, 24670,
24675, 24685, 25500, 25505, 25515, 25520, 25525, 25526, 25530, 25535,
25545, 25560, 25565, 25574, 25575, 25600, 25605, 25611, 25620, 25622,
25624, 25628, 25630, 25635, 25645, 25650, 25651, 25652, 25680, 25685,
26600, 26605, 26607, 26608, 26615, 27193, 27194, 27200, 27202, 27215,
27216, 27217, 27218, 27220, 27222, 27226, 27227, 27228, 27230, 27232,
27235, 27236, 27238, 27240, 27244, 27245, 27246, 27248, 27254, 27500,
27501, 27502, 27503, 27506, 27507, 27508, 27509, 27510, 27511, 27513,
27514, 27520, 27524, 27530, 27532, 27535, 27536, 27538, 27540, 27750,
27752, 27756, 27758, 27759, 27760, 27762, 27766, 27780, 27781, 27784,
27786, 27788, 27792, 27808, 27810, 27814, 27816, 27818, 27822, 27823,
27824, 27825, 27826, 27827, 27828, 28400, 28405, 28406, 28415, 28420,
28430, 28435, 28436, 28445, 28450, 28455, 28456, 28465, 28470, 28475,
28476, 28485; 2) POVs: 733.1*, 805*-806*, 807.0*-807.3, 808*-815*,
818*-825*, 827*, 828*; 3) V Procedure: 79.00-79.03, 79.05-79.07, 79.09,
79.10-79.13, 79.15-79.17, 79.19, 79.20-79.23, 79.25-79.27, 79.29,
79.30-79.33, 79.35-79.37, 79.39, 79.60-79.63, 79.65-79.67, 79.69.
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BMD Test codes: 1) CPT: 76070, 76071, 76075, 76076, 76078, 76499, 76977, 76999, 78350, 78351; 2) V Procedure 88.98.

Treatment medication codes defined with medication taxonomy BGP HEDIS OSTEOPOROSIS MEDS. (Medications are Alendronate, Risedronate, Calcitonin, Raloxifene, Estrogen, and Teriparatide.)

For FY2006, identify the rate of testing and/or treatment for osteoporosis after fracture.

REPORT % PREV YR % CHG from BASE % CHG from PERIOD PREV YR % PERIOD BASE %

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Osteoporosis Management (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female Active Clinic 67 and older	al Pts							
w/fracture	56		62			50		
# w/osteoporosis tree or testing	atment 10	17.9	13	21.0	-3.1	2	4.0	+13.9
Female User Pop Pts 67 and older w/fracture	58		64			53		
<pre># w/osteoporosis tre or testing</pre>	atment 11	19.0	14	21.9	-2.9	2	3.8	+15.2

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

Osteoporosis Screening in Women

### Denominator(s):

Female Active Clinical patients ages 65 and older without a documented history of osteoporosis.

Female User Population patients ages 65 and older without a documented history of osteporosis.

#### Numerator(s):

Patients who had osteoporosis screening documented in the past 2 years, including documented refusals in past year.

A: Patients with documented refusal in past year.

Age is calculated at the beginning of the Report period.

Definition for patients without osteoporosis: No osteoporosis diagnosis ever (POV 733.\*).

Osteoporosis screening defined as any one of the following in the past two years or documented refusal in the past year: 1) Central DEXA: CPT 76075; 2) Peripheral DEXA: CPT 76076; 3) Central CT: CPT 76070; 4) Peripheral CT: CPT 76071; 5) US Bone Density: CPT 76977; or 6) Quantitative CT: V Procedure 88.98.

Establish the baseline rate of screening women ages 65 and older for osteoporosis.

	REPORT PERIOD	90	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
Female Active Clinica Pts =>65	il 518		527			525		
# w/osteoporosis screenin past 2 years	8	1.5	2	0.4	+1.2	0	0.0	+1.5
A. # Refusals w/ % of Total Screening	2	25.0	0	0.0	+25.0	0	0.0	+25.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Osteoporosis Screening in Women (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		૦	CHG from BASE %
Female User Pop Pts =>65	660		662			631		
<pre># w/osteoporosis in past 2 years A. # Refusals w/</pre>	8	1.2	2	0.3	+0.9	0	0.0	+1.2
Total Screening	2	25.0	0	0.0	+25.0	0	0.0	+25.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

#### Asthma

### Denominator(s):

Active Clinical patients.

- A: Active Clinical users under age 5.
- B: Active Clinical users ages 5 to 64.
- C: All Active Clinical users ages 65 and older.

#### Numerator(s):

Patients who have had two asthma-related visits during the Report Period or categorized in ARS as persistent.

Patients from Numerator 1 who have been hospitalized at any hospital for asthma during the Report Period.

Age is calculated at beginning of the Report Period. Asthma visits are defined as diagnosis (PV) 493.\*. Persistent asthma is defined in ARS for Active patients as Severity 2, 3 or 4. Hospitalizations defined as service category H with primary POV 493.\*.

Reduce percentage of asthmatic patients who are hospitalized for asthma.

Hospitalizations: HP 2010 Goal Under 5: 25 per 10,000; 5-64: 7.7 per 10,000; 65 and older: 11 per 10,000

	REPORT PERIOD	00	PREV YR PERIOD	0/0	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Total Active Clinica	al							
Patients	16,302		15,831			15,907		
# w/asthma	611	3.7	608	3.8	-0.1	579	3.6	+0.1
under 5	113	18.5	125	20.6	-2.1	113	19.5	-1.0
5-64	444	72.7	433	71.2	+1.5	413	71.3	+1.3
65 and older	54	8.8	50	8.2	+0.6	53	9.2	-0.3
# w/asthma								
hospitalization	31	5.1	31	5.1	-0.0	30	5.2	-0.1
under 5	12	38.7	15	48.4	-9.7	9	30.0	+8.7
5-64	16	51.6	11	35.5	+16.1	19	63.3	-11.7
65 and older	3	9.7	5	16.1	-6.5	2	6.7	+3.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Asthma Quality of Care

### Denominator(s):

Active Clinical patients ages 5-56 with persistent asthma within the year prior to the beginning of the Report period without a documented history of emphysema or chronic obstructive pulmonary disease (COPD).

- A: Active Clinical patients ages 5-9.
- B: Active Clinical patients ages 10-17.
- C: Active Clinical patients ages 18-56.

User Population patients ages 5-56 with persistent asthma within the year prior to the beginning of the Report period without a documented history of emphysema and chronic obstructive pulmonary disease (COPD).

- A: User Population patients ages 5-9.
- B: User Population patients ages 10-17.
- C: User Population patients ages 18-56.

#### Numerator(s):

Patients who had at least one dispensed prescription for primary asthma therapy medication during the Report period.

Age of the patient is calculated at the beginning of the Report period. Patients diagnosed with emphysema or COPD at any time on or before the end of the Report period are excluded from the denominator. Emphysema defined as any visit with POV codes: 492.\*, 506.4, 518.1, 518.2. Chronic obstructive pulmonary disease (COPD) defined as any visit with POV codes: 491.20, 491.21, 496, 506.\*.

Persistent asthma defined as any of the following within the year prior to the beginning of the Report period:

- 1. At least one visit to Clinic Code 30 (Emergency Medicine) with primary diagnosis 493\* (asthma),
- 2. At least one acute inpatient discharge with primary diagnosis 493.\*. Acute inpatient discharge defined as Service Category of H,
- 3. At least four outpatient visits, defined as Service Categories A, S, or O, with primary or secondary diagnosis of 493.\* AND at least two asthma medication dispensing events (see definition below), or
- 4. At least 4 asthma medication dispensing events (see definition below). If the sole medication was leukotriene modifiers, then MUST also meet criteria in 1-3 above or have at least one visit with POV 493.\* within the year prior to the beginning of the Report period.

A dispensing event is one prescription of an amount lasting 30 days or less. For RXs longer than 30 days, divide the days' supply by 30 and round down to convert. For example, a 100-day RX is equal to three dispensing events (100/30 = 3.33, rounded down to 3). Also, two different RXs dispensed on the same day are counted as two different dispensing events. Inhalers should also be counted as one dispensing

Report Period: Jan 01, 2005 to Dec 31, 2005
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event.

NOTE: If the medication was started and then discontinued, CRS will recalculate the # Days Prescribed by subtracting the prescription date (i.e. visit date) from the V Medication Discontinued Date. Example: Rx Date=11/15/2003, Discontinued Date=11/19/2003, Recalculated # Days Prescribed=4.

To be included in the numerator, patient must have a non-discontinued prescription for primary asthma therapy (see list of medications below) during the Report period.

Primary asthma therapy medication codes defined with medication taxonomies: BGP ASTHMA CONTROLLERS, BGP ASTHMA INHALED STEROIDS, AND BGP ASTHMA LEUKOTRIENE. (Medications are: Inhaled Corticosteroids, Nedocromil, Cromolyn Sodium, Leukotriene Modifiers or Methylxanthines.)

For FY 2006, report the rate for patients with persistent asthma who have received primary asthma therapy medications.

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts w/persistent asthma	5-56 197		208			236		
# w/asthma control medication	82	41.6	72	34.6	+7.0	90	38.1	+3.5
A. Active Clinical ages 5-9	42		42			44		
<pre># w/asthma control medication</pre>	6	14.3	6	14.3	+0.0	6	13.6	+0.6
B. Active Clinical ages 10-17	43		49			52		
<pre># w/asthma control medication</pre>	10	23.3	9	18.4	+4.9	10	19.2	+4.0

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Asthma Quality of Care (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
C. Active Clinical ages 18-56	112		117			140		
<pre># w/asthma control medication</pre>	66	58.9	57	48.7	+10.2	74	52.9	+6.1
User Pop Pts 5-56 w/persistent asthma	219		230			258		
# w/asthma control medication	83	37.9	72	31.3	+6.6	90	34.9	+3.0
A. User Pop ages 5-9	47		43			48		
<pre># w/asthma control medication</pre>	6	12.8	6	14.0	-1.2	6	12.5	+0.3
B. User Pop ages 10-17	44		56			55		
<pre># w/asthma control medication</pre>	10	22.7	9	16.1	+6.7	10	18.2	+4.5
C. User Pop ages 18-56	128		131			155		
<pre># w/asthma control medication</pre>	67	52.3	57	43.5	+8.8	74	47.7	+4.6

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Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Chronic Kidney Disease Assessment

### Denominator(s):

Active Clinical patients ages 18 and older with serum creatinine test during the Report Period.

User Population patients ages 18 and older with serum creatinine test during the Report Period.

### Numerator(s):

Patients with Estimated GFR.

A: Patients with GFR less than (<) 60

Age is calculated at beginning of the Report Period. Creatinine definition: CPT 82540, 82565-75; LOINC taxonomy; site-populated taxonomy DM AUDIT CREATININE TAX. Estimated GFR definition: site-populated taxonomy BGP GPRA ESTIMATED GFR TAX; LOINC code 33914-3.

During FY 2006, report the rate of patients who are assessed for chronic kidney disease.

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts => 18 with Serum Creatinine test	3,965		2,718			413		
# w/Est GFR # w/GFR <60	1,072 224	27.0 5.6	64 61	2.4		0	0.0	+27.0 +5.6
User Pop Pts =>18 with Serum Creatinine	4,313		2,978			414		
# w/ Est GFR # w/GFR <60	1,137 235	26.4 5.4	70 67	2.4	+24.0 +3.2	0 0	0.0	+26.4 +5.4

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#### Prediabetes/Metabolic Syndrome

#### Denominator(s):

Active Clinical patients ages 18 and older diagnosed with prediabetes/metabolic syndrome without a documented history of diabetes. User Population patients ages 18 and older diagnosed with prediabetes/metabolic syndrome without a documented history of diabetes.

#### Numerator(s):

Patients with Blood Pressure documented at least twice during the Report Period.

Patients with LDL completed, regardless of result, during the Report Period.

Patients with fasting glucose test, regardless of result, during the Report Period.

Patients with positive urine protein test or, if urine protein test is negative, any microalbuminuria test, regardless of result, during the Report Period.

Patients who have been screened for tobacco use during the Report Period. Patients for whom a BMI could be calculated, including refusals in the past year.

Patients who have received any lifestyle adaptation counseling, including medical nutrition counseling, or nutrition, exercise or other lifestyle education during the Report Period.

Patients screened for depression or diagnosed with a mood disorder at any time during the Report period, including documented refusals in past year. Patients with all screenings.

Age is calculated at beginning of the Report Period.

Prediabetes/Metabolic Syndrome defined as:

- 1. Diagnosis of prediabetes/metabolic syndrome, defined as: Two visits during the Report Period with POV 277.7, OR
- 2. Any three or more of the following occurring during the Report Period except as otherwise noted:
- A. BMI  $\Rightarrow$  30 OR Waist Circumference  $\Rightarrow$ 40 inches for men or  $\Rightarrow$ 35 inches for women,
- B. Triglyceride value >=150,
- C. HDL value <40 for men or <50 for women,
- D. Patient diagnosed with hypertension OR mean Blood Pressure value => 130/85 where systolic is =>130 OR diastolic is =>85,
- E. Fasting Glucose value =>100 AND <126. NOTE: Waist circumference and fasting glucose values will be checked last.

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Definition for patients without diabetes: No diabetes diagnosis ever (POV 250.00-250.93).

#### Tests/Other Definitions:

- 1. BMI: CRS calculates BMI at the time the report is run, using NHANES II. For 18 and under, a height and weight must be taken on the same day any time during the Report Period. For 19 through 50, height and weight must be recorded within last 5 years, not required to be on the same day. For over 50, height and weight within last 2 years, not required to be recorded on same day. Refusals include REF (refused), NMI (not medically indicated) and UAS (unable to screen) and must be documented during the past year. For ages 18 and under, both the height and weight must be refused on the same visit at any time during the past year. For ages 19 and older, the height and the weight must be refused during the past year and are not required to be on the same visit;
- 2. Triglyceride: CPT 84478; LOINC taxonomy; or site-populated taxonomy DM AUDIT TRIGLYCERIDE TAX;
- 3. HDL: CPT 83718; LOINC taxonomy; or site-populated taxonomy DM AUDIT HDL TAX;
- 4. Fasting Glucose: POV 790.21; LOINC taxonomy; or site-populated taxonomy DM AUDIT FASTING GLUCOSE TAX;
- 5. LDL: Finds last test done during the Report period; defined as: CPT 83721; LOINC taxonomy; or site-populated taxonomy DM AUDIT LDL CHOLESTEROL TAX;
- 6. Blood Pressure: CRS uses mean of last 3 Blood Pressures documented on non-ER visits during the Report Period. If 3 BPs are not available, uses mean of last 2 non-ER BPs. If a visit contains more than 1 BP, the lowest BP will be used, defined as having the lowest systolic value. The mean Systolic value is calculated by adding the last 3 (or 2) systolic values and dividing by 3 (or 2). The mean Diastolic value is calculated by adding the diastolic values from the last 3 (or 2) blood pressures and dividing by 3 (or 2).
- 7. Hypertension: Diagnosis of (POV or problem list) 401.\* occurring prior to the Report period, and at least one hypertension POV during the Report period.
- 8. Urine Protein/Microalbuminuria: CRS searches for last microalbuminuria test done during the Report period, regardless of result. If none found, searches for last urine protein test with positive (Y) value in same time period. Positive value for urine protein is defined as: 1) First character of result is "P", "p", M, m, L, 1, S,

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
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or s; 2) Contains a + sign; 3) Contains a > symbol; 4) numeric value (if the result is a number) is > (greater than) 29. 1) Urine protein defined as: LOINC taxonomy; site-populated taxonomy DM AUDIT URINE PROTEIN TAX.
2) Microalbuminuria defined as: CPT codes 82043, 82044; LOINC taxonomy; site-populated taxonomy DM AUDIT MICROALBUMINURIA TAX or DM AUDIT A/C RATIO taxonomy.

- 9. Tobacco Screening: At least one of the following during the Report Period: 1. Any health factor for category Tobacco documented during Current Report period; 2. Tobacco-related diagnoses (POV or current Active Problem List) 305.1 or V15.82; 3. Dental code 1320; 4. Any patient education code containing "TO-", "-TO" or "-SHS.
- 10. Lifestyle Counseling: Any of the following during the Report Period:
- A. Medical nutrition counseling defined as: CPT 97802-97804, G0270, G0271; Provider codes 07, 29, 97, 99; Clinic codes 67 (dietary) or 36 (WIC),
- B. Nutrition education defined as: POV V65.3 dietary surveillance and counseling; patient education codes ending "-N" (Nutrition) or "-MNT" (or old code "-DT" (Diet)),
- C. Exercise education defined as: POV V65.41 exercise counseling; patient education codes ending "-EX" (Exercise),
- D. Related exercise and nutrition counseling defined as: patient education codes ending "-LA" (lifestyle adaptation) or containing "OBS-" (obesity).
- 11. Depression Screening/Mood Disorder DX: Any of the following during the Report Period: A) Depression Screening: Exam Code 36, POV V79.0, or BHS problem code 14.1 (screening for depression) or refusal, defined as any PCC refusal in past year with Exam Code 36; or B) Mood Disorder DX: At least two visits in PCC or BHS during the Report period with POV for: Major Depressive Disorder, Dysthymic Disorder, Depressive Disorder NOS, Bipolar I or II Disorder, Cyclothymic Disorder, Bipolar Disorder NOS, Mood Disorder Due to a General Medical Condition, Substance-induced Mood Disorder, or Mood Disorder NOS. These POV codes are: 296.\*, 291.89, 292.84, 293.83, 300.4, 301.13, or 311 or BHS POV 14 or 15.

Increase the proportion of patients with metabolic syndrome who receive all appropriate assessments.

BP Assessed: IHS 2010 Goal: 95%

Others: TBD

REPORT % PREV YR % CHG from BASE % CHG from PERIOD PERIOD PREV YR % PERIOD BASE %

Report Period: Jan 01, 2005 to Dec 31, 2005
Previous Year Period: Jan 01, 2004 to Dec 31, 2004
Baseline Period: Jan 01, 2000 to Dec 31, 2000

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Prediabetes/Metabolic Syndrome (con't)

	REPORT PERIOD	90	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
Active Clinical Pts	=>18							
w/PreDiabetes/								
Met Syn	31		16			6		
# w/BP	20	02 5	1 -	02.0	0 0	_	100 0	6 5
documented	29	93.5	15	93.8	-0.2		100.0	-6.5
<pre># w/LDL done # w/ fasting</pre>	9	29.0	0	0.0	+29.0	2	33.3	-4.3
# w/ lasting qlucose	16	51.6	3	18.8	+32.9	0	0.0	+51.6
# w/ pos urine prote		51.6	3	10.0	+34.9	U	0.0	+51.0
microalbuminuria	3 any	9.7	0	0.0	+9.7	0	0.0	+9.7
# w/Tobacco Screening	_	9.1	U	0.0	T9.1	U	0.0	T9.7
w/in 1 yr	19 1	3.2	0	0.0	+3.2	0	0.0	+3.2
# w/BMI calculated	Τ.	3.4	U	0.0	±3.∠	U	0.0	+3.∠
or refusal	27	87.1	14	87.5	-0.4	5	83.3	+3.8
# w/lifestyle adapta		07.1	TA	07.5	-0.4	3	03.3	+3.0
counseling	5	16.1	3	18.8	-2.6	3	50.0	-33.9
# w/Depression scree	_	10.1	3	10.0	2.0	3	30.0	33.7
DX, or refusal	5	16.1	0	0.0	+16.1	1	16.7	-0.5
# w/ All	3	10.1	O	0.0	110.1		10.7	0.5
screenings	1	3.2	0	0.0	+3.2	0	0.0	+3.2
	_	3.2	· ·	0.0	. 3 . 2	· ·	0.0	. 3 . 2
User Pop Pts =>18								
w/PreDiabetes/								
Met Syn	31		16			6		
# w/BP								
documented	29	93.5	15	93.8	-0.2	6	100.0	-6.5
# w/LDL done	9	29.0	0	0.0	+29.0	2	33.3	-4.3
# w/ fasting		20.0	· ·	0.0	120.0	2	33.3	1.5
glucose	16	51.6	3	18.8	+32.9	0	0.0	+51.6
# w/ pos urine prote		32.0	J		, 52,7	· ·	0.0	
microalbuminuria	3	9.7	0	0.0	+9.7	0	0.0	+9.7
# w/Tobacco Screening	na							
w/in 1 yr	1	3.2	0	0.0	+3.2	0	0.0	+3.2
# w/BMI calculated								
or refusal	27	87.1	14	87.5	-0.4	5	83.3	+3.8
<pre># w/lifestyle adapta</pre>								
counseling	5	16.1	3	18.8	-2.6	3	50.0	-33.9
# w/Depression scree	ening,							
DX, or refusal	5	16.1	0	0.0	+16.1	1	16.7	-0.5
# w/ All								
screenings	1	3.2	0	0.0	+3.2	0	0.0	+3.2

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

#### Medications Education

#### Denominator(s):

Active Clinical patients with Medications dispensed at their facility during the Report Period.

All User Population patients with Medications dispensed at their facility during the Report Period.

#### Numerator(s):

Patients who were provided patient education about their medications in any location.

Patients receiving medications are identified by any entry in the VMed file for your facility. Med education defined as: PFE code of M-I (medication information); M-DI (Drug interaction); M-FU (Medication follow up); M-L (Medication patient information literature), DMC-IN (Diabetes Medicine - Insulin) or any PFE code containing "-M".

Increase the proportion of patients taking medications who are receiving patient education about their medications.

HP 2010 Goal: 95%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	olo	CHG from BASE %
Active Clinical Pts medications	receiving 11,290		10,720			10,387		
<pre># receiving medication educ</pre>	36	0.3	29	0.3	+0.0	5	0.0	+0.3
User Pop Pts receiving medications	ng 12,616		12,105			11,828		
<pre># receiving medication educ</pre>	36	0.3	29	0.2	+0.0	5	0.0	+0.2

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

#### Public Health Nursing

#### Denominator(s):

All User Population patients.

Number of visits by PHNs in any setting, including Home.

- A. Number of visits to patients ages 0-28 days (Neonate) in any setting.
- B. Number of visits to patients ages 29 days 12 months (infants) in any setting.
- C. Number of visits to patients ages 1-64 years in any setting.
- D. Number of visits to patients ages 65 and older (Elders) in any setting.
- E. Number of PHN driver/interpreter (provider code 91) visits.

Number of visits by PHNs in Home setting.

- A. Number of Home visits to patients age 0-28 days (Neonate)
- B. Number of Home visits to patients age 29 days to 12 months (Infants)
- C. Number of Home visits to patients ages 1-64 years
- D. Number of Home visits to patients aged 65 and over (Elders).
- E. Number of PHN driver/interpreter (provider code 91) visits in a HOME setting.

#### Numerator(s):

For User Population only, the number of patients in the denominator served by PHNs in any setting, including Home.

For User Population only, the number of patients in the denominator served by a PHN driver/interpreter in any setting.

For User Population only, the number of patients in the denominator served by PHNs in a HOME setting.

For User Population only, the number of patients in the denominator served by a PHN driver/interpreter in a HOME Setting.

PHN visit is defined as any visit with primary or secondary provider code 13 or 91. Home visit defined as: (1) clinic 11 and a primary or secondary provider code 13 or 91 or (2) Location Home (as defined in Site Parameters) and a primary or secondary provider code 13 or 91.

During FY 2006, maintain the total number of public health nursing services (primary and secondary treatment and preventive services) provided to individuals in all settings at the FY 2005 workload levels.

IHS Performance - FY 2004 - 423,379, FY 2003 - 359,089

REPORT PREV YR CHG from BASE CHG from PERIOD % PERIOD % PREV YR PERIOD % BASE

### \*\*\* IHS 2006 Clinical Performance Report \*\*\*

### DEMO HOSPITAL

Report Period: Jan 01, 2005 to Dec 31, 2005 Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Public	Health	Nursing	(con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %		%	CHG from BASE %
All User Population patients	24,005		23,943			23,717		
<pre># served by PHNs in any Setting # served by PHN dri interpreter - in any Setting # served by PHNs in a Home Setting # served by PHN</pre>	4,555 rers/	19.0	4,043	16.9	+2.1	4,735	20.0	-1.0
	227	0.9	368	1.5	-0.6	469	2.0	-1.0
	1,809	7.5	1,921	8.0	-0.5	1,564	6.6	+0.9
drivers/interpreter in Home Setting	225	0.9	236	1.0	-0.0	374	1.6	-0.6
Total # PHN Visits - Any Setting +2,402	14,219		13,158		+1,06	111,817		
A. Ages 0-28 days	0		0		+0	0		+0
B. Ages 29 days - 12 months	1,556		1,579		-23	943		+613
C. Ages 1-64 years +2,497	10,569		8,974		+1,59	5 8,072		
D. Ages 65+	2,094		2,605		-511	2,802		-708
E. Driver/Interprete visits - any setting	er 548		740		-192	981		-433
Total # PHN Visits - Home Setting	5,655		6,650		-995	5,449		+206
A. Ages 0-28 days	0		0		+0	0		+0
B. Ages 29 days- 12 months	774		1,006		-232	899		-125

Report Period: Jan 01, 2005 to Dec 31, 2005

Previous Year Period: Jan 01, 2004 to Dec 31, 2004 Baseline Period: Jan 01, 2000 to Dec 31, 2000

### Public Health Nursing (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR	BASE PERIOD	o\o	CHG from BASE
C. Ages 1-64 years	3,310		3,685		-375	2,992		+318
D. Ages 65+	1,571		1,959		-388	1,558		+13
E. Driver/interpr visits - Home Setting	eter 544		600		-56	871		-327